| Fill in this Information to Identify your case: United States Bankruptcy Court for the: Northern District of Illinois | | UNITED STATES BANKRUPTCY CONTINERN DISTRICT OF ILLING APR 07 2017 | OURT OIS |
|---|---|---|---------------------------------|
| Case number (if knowa): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 | JEFFREY P. ALLSTEADT, CL | .ERK |
| | G Chapter 13 | | neck if this is an ended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number

| 1. Your full name | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|--|----------------------------|---|
| Write the name that is on your government-issued picture identification (for example, your driver's license or | First name Aw Antoin | Pirst name |
| passport). Bring your picture identification to your meeting | Middle name Wave | Middle name |
| with the trustee. | Suffix (Sr., Jr., II, III) | Last name Suffix (Sr., Jr., II, III) |
| AR otherwise | | S. A. Mary |
| . All other names you have used in the last 8 years | First name | Construction First name |
| maiden names. | Middle name | Middle name |
| | Last name | Last name |
| • | First name Middle name | First name |
| · | asi name | Middle name Last name |
| 0.1.4.4.4. | | |
| number or federal | xx - xx - 4 2 5 0 | xxx - xx - |
| Individual Taxpayer | xx - xx - | OR OR |

Debtor 1 Case number (if kno About Debtor 1: Any business names have not used any business names or EINs. and Employer 1 have not used any business names or EINs. Identification Numbers (EIN) you have used in the last 8 years Business name. . Business name Include trade names and doing business as names Business name Business name EIN 5. Where you live If Debtor 2 lives at a different address: Number Street City State ZIP Code County County If your mailing address is different from the one If Debtor 2's mailing address is different from above, fill it in here. Note that the court will send yours, fill it in here. Note that the court will send any notices to you at this mailing address. any notices to this mailing address. Number Number Street P.O. Box P.O. Box ZIP Code State ZIP Code TE 34 5 17 6. Why you are choosing Check one: Check one: this district to file for Over the last 180 days before filing this petition, bankruptcy Over the last 180 days before filing this petition, I have lived in this district longer than in any I have lived in this district longer than in any other district. other district. ☐ I have another reason. Explain: ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) (See 28 U.S.C. § 1408.)

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Document

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Debtor 1

Case number (if known)___

Tell the Court About Your Bankruptcy Case

| 7. | | | | | | | | |
|-------|--|--|--|--|---|--|--|--|
| •• | The chapter of the Bankruptcy Code you | Check of the Check | one. (For a brief description kruptcy (Form 2010)). Also | on of each, see <i>Noti</i> o, go to the top of p | ce Required by 11 age 1 and check t | 1 U.S.C. § 342(b) for Individuals Filing he appropriate box. | | |
| | are choosing to file under | ⊈ Cha | apter 7 | | | | | |
| | dider | ☐ Chapter 11 | | | | | | |
| | | ☐ Cha | apter 12 | | | | | |
| | | ☐ Cha | apter 13 | | | | | |
| 8. | How you will pay the fee | loca you sub | al court for more details rself, you may pay with | y the entire fee when I file my petition. Please check with the clerk's office in your art for more details about how you may pay. Typically, if you are paying the fee you may pay with cash, cashier's check, or money order. If your attorney is no your payment on your behalf, your attorney may pay with a credit card or check e-printed address. | | | | |
| | | | | | | otion, sign and attach the ents (Official Form 103A). | | |
| | | | | | | , | | |
| | | By la less pay | aw, a judge may, but is than 150% of the offici | s not required to, vital poverty line that ial poverty line that I f you choose th | waive your fee, a at applies to you iis option, you m | tion only if you are filing for Chapter is and may do so only if your income is ar family size and you are unable to sust fill out the Application to Have the with your petition. | | |
|). | Have you filed for | D No | | | | | | |
| | bankruptcy within the last 8 years? | | District | When | MM / DD / YYYY | Case number | | |
| | | | | | | | | |
| | | | District | When | MM / DD / YYYY | Case number | | |
| | | | District | When | HILL DD ()222/ | Case number | | |
| | | | | | MM / DD / YYYY | | | |
| | | | | | | | | |
| 0. | Are any bankruptcy | Ū No | | | | | | |
| 0. | cases pending or being | ☐ No ☐ Yes. | Debtor | | | Relationship to you | | |
| 0. | cases pending or being filed by a spouse who is not filing this case with | | Debtor | When | | Relationship to you Case number, if known | | |
| 0. | cases pending or being filed by a spouse who is | | Debtor | When | MM / DD / YYYY | | | |
| 0. | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an | | Debtor | | | Case number, if known | | |
| ····· | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an | | District | | | Case number, if known | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | Debtor | | | Case number, if known | | |
| 1. | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an | | Debtor District Go to line 12. | When | MM / DD / YYYY | Case number, if known | | |
| 1. | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Do you rent your | Yes. | Debtor District Go to line 12. Has your landlord obtain | When | MM / DD / YYYY | Case number, if known Relationship to you Case number, if known | | |

| tor 1 First Name Middle N | <u>L</u> | Last Name | Case number (dknown | | |
|---|---------------------|--|--|-------------------------------------|--|
| t3: Report About Any | Busine | sses You Own as a Sole Proprie | etor | | |
| Are you a sole proprietor | r DNo | . Go to Part 4. | *************************************** | | ······································ |
| of any full- or part-time business? | ☐ Ye | s. Name and location of business | | • | |
| A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as | | Name of business, if any | | | |
| a corporation, partnership, or LLC. If you have more than one | | Number Street | | | |
| sole proprietorship, use a separate sheet and attach it | | | <i>i</i> | | |
| o this petition. | | City | State | ZIP Code | |
| | | | the second secon | | |
| | | Check the appropriate box to descri- | • | | |
| | | Health Care Business (as define | | | |
| | | ☐ Single Asset Real Estate (as def | fined in 11 U.S.C. § 101(51B)) | | |
| | | ☐ Stockbroker (as defined in 11 U. | S.C. § 101(53A)) | • | |
| | | Commodity Broker (as defined in | n 11 U.S.C. § 101(6)) | | |
| | | ☐ None of the above | | | |
| Chapter 11 of the Bankruptcy Code and Tre you a <i>small business</i> Hebtor? | most re any of t | appropriate deadlines. If you indicate cent balance sheet, statement of oper hese documents do not exist, follow the | rations, cash-flow statement, a | and federal income tax return or if | |
| for a definition of small | ☐ No. | I am not filing under Chapter 11. | | | |
| | ☐ No. | I am filing under Chapter 11, but I an the Bankruptcy Code. | n NOT a small business debto | r according to the definition in | |
| | | , | | | |
| nusiness deblor, see 1 U.S.C. § 101(51D). | | I am filing under Chapter 11 and I am Bankruptcy Code. | n a small business debtor acco | ording to the definition in the | |
| 1 U.S.C. § 101(51D). | ☐ Yes. | I am filing under Chapter 11 and I am Bankruptcy Code. | | | |
| 1 U.S.C. § 101(51D). | ☐ Yes. | . I am filing under Chapter 11 and I am | | | |
| 1 U.S.C. § 101(51D). | Yes. | I am filing under Chapter 11 and I am Bankruptcy Code. | | | |
| 49. Report if You Own or you own or have any roperty that poses or is | O Yes. | I am filing under Chapter 11 and I am Bankruptcy Code. Any Hazardous Property or An | y Property That Needs In | | |
| 48 Report if You Own or you own or have any roperty that poses or is leged to pose a threat | O Yes. | I am filing under Chapter 11 and I am Bankruptcy Code. | y Property That Needs In | | |
| 48 Report if You Own or o you own or have any roperty that poses or is leged to pose a threat imminent and lentifiable hazard to | O Yes. | I am filing under Chapter 11 and I am Bankruptcy Code. Any Hazardous Property or An | y Property That Needs In | | |
| As Report if You Own or o you own or have any roperty that poses or is lleged to pose a threat fimminent and lentifiable hazard to ublic health or safety? | O Yes. | I am filing under Chapter 11 and I am Bankruptcy Code. Any Hazardous Property or An | y Property That Needs In | | |
| 4: Report if You Own or you own or have any roperty that poses or is leged to pose a threat imminent and entifiable hazard to ublic health or safety? If do you own any roperty that needs | O Yes. | I am filing under Chapter 11 and I am Bankruptcy Code. Any Hazardous Property or Any What is the hazard? | y Property That Needs In | nmediate Attention | may. |
| Report if You Own or you own or have any roperty that poses or is leged to pose a threat imminent and entifiable hazard to ablic health or safety? If do you own any roperty that needs amediate attention? | O Yes. | I am filing under Chapter 11 and I am Bankruptcy Code. Any Hazardous Property or An | y Property That Needs In | nmediate Attention | |
| Report if You Own or oyou own or have any reporty that poses or is leged to pose a threat imminent and lentifiable hazard to ablic health or safety? If do you own any reporty that needs mediate attention? Or example, do you own wrishable goods, or livestock at must be fed, or a building | O Yes. | I am filing under Chapter 11 and I am Bankruptcy Code. Any Hazardous Property or Any What is the hazard? | y Property That Needs In | nmediate Attention | |
| Report if You Own or you own or have any roperty that poses or is leged to pose a threat fimminent and fentifiable hazard to ablic health or safety? If do you own any roperty that needs have attention? The example, do you own rishable goods, or livestock at must be fed, or a building | O Yes. | I am filing under Chapter 11 and I am Bankruptcy Code. Any Hazardous Property or Any What is the hazard? If immediate attention is needed, wh | y Property That Needs In | nmediate Attention | |
| 1 U.S.C. § 101(51D). | O Yes. | I am filing under Chapter 11 and I am Bankruptcy Code. Any Hazardous Property or Any What is the hazard? | y Property That Needs In | nmediate Attention | |
| Report if You Own or oyou own or have any reporty that poses or is leged to pose a threat imminent and lentifiable hazard to ablic health or safety? If do you own any reporty that needs mediate attention? Or example, do you own wrishable goods, or livestock at must be fed, or a building | O Yes. | I am filing under Chapter 11 and I am Bankruptcy Code. Any Hazardous Property or Any What is the hazard? If immediate attention is needed, wh | y Property That Needs In | nmediate Attention | |
| Report if You Own or you own or have any operty that poses or is leged to pose a threat imminent and entifiable hazard to ablic health or safety? do you own any operty that needs amediate attention? | or Have No Yes. | I am filing under Chapter 11 and I am Bankruptcy Code. Any Hazardous Property or Any What is the hazard? If immediate attention is needed, wh | y Property That Needs In y is it needed? Street | nmediate Attention | |

Case 17-11087 Doc 1 Filed 04/07/17 Entered 04/07/17 14:08:15 Desc Main Page 5 of 56 Document Debtor 1 Case number (it knows Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 2 (Spouse Only in a Joint Case): About Debtor 1: 15. Tell the court whether you have received a briefing about credit You must check one You must check one:counseling. 1 received a briefing from an approved-credit ☐ I received a briefing from an approved credit counseling agency within the 180 days before I counseling agency within the 180 days before I The law requires that you filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a receive a briefing about credit certificate of completion. certificate of completion. counseling before you file for Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment bankruptcy. You must plan, if any, that you developed with the agency. plan, if any, that you developed with the agency. truthfully check one of the following choices, If you I received a briefing from an approved credit I received a briefing from an approved credit cannot do so, you are not counseling agency within the 180 days before I counseling agency within the 180 days before I eligible to file. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. ---If you file anyway, the court Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, can dismiss your case, you you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment will lose whatever filing fee plan, if any. plan, if any. you paid, and your creditors can begin collection activities I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling services from an approved agency, but was services from an approved agency, but was unable to obtain those services during the 7 unable to obtain those services during the 7 days after I made my request, and exigent days after I made my request, and exigent circumstances merit a 30-day temporary waiver circumstances merit a 30-day temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances bankruptcy, and what exigent circumstances required you to file this case. required you to file this case. Your case may be dismissed if the court is Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. still receive a briefing within 30 days after you file. You must file a certificate from the approved You must file a certificate from the approved agency, along with a copy of the payment plan you agency, along with a copy of the payment plan you developed, if any, If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 only for cause and is limited to a maximum of 15 days. days. I am not required to receive a briefing about I am not required to receive a briefing about credit counseling because of: credit counseling because of: . Incapacity. I have a mental illness or a mental ☐ Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me ☐ Disability. My physical disability causes me Disability. to be unable to participate in a to be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. ☐ Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a If you believe you are not required to receive a briefing about credit counseling, you must file a briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

motion for waive of credit counselling with the count.

Filed 04/07/17 Entered 04/07/17 14:08:15 Case 17-11087 Document Page 6 of 56 Debtor 1 Case number (ir kno Part 6: Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment, No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under No. 1 am not filing under Chapter 7. Go to line 18. Chapter 7? administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is excluded and administrative expenses ☐ Yes are paid that funds will be available for distribution to unsecured creditors? 1-49 1,000-5,000 18. How many creditors do 25,001-50,000 you estimate that you 50-99 5,001-10,000 50,001-100,000 owe? 10,001-25,000 100-199 ☐ More than 100,000 🖵 200-999 \$0-\$50,000 19. How much do you ☐ \$1,000,001-\$10 million □ \$500,000,001-\$1 billion estimate your assets to \$50,001-\$100,000 ☐ \$10,000,001-\$50 million \$1,000,000,001=\$10 billion be worth? \$50,000,001-\$100 million **1** \$100,001-\$500,000 ☐ \$10,000,000,001-\$50 billion ☐ \$500,001-\$1 million 🗖 \$100,000,001-\$500 million ☐ More than \$50 billion 20. How much do you \$0-\$50,000 ☐ \$1,000,001-\$10 million \$500,000,001-\$1 billion estimate your liabilities \$50,001-\$100,000 □ \$10,000,001-\$50 million ☐ \$1,000,000,001-\$10 billion to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion ☐ \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion art 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, 1 am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 MM / DD : / YYYY .:

| Case 17-1108 | 7 Doc 1 Filed 04/ Docum | | | Desc Main | |
|--|--|---|--|---|--|
| Debtor 1 An tonue Middle Name | Last Name | Cas | e number (#known) | | |
| For you if you are filing this pankruptcy without an attorney | The law allows you, as an should understand that themselves successfully consequences, you are | many people find it ex . Because bankruptcy | tremely difficult to rep has long-term financ | present | |
| f you are represented by in attorney, you do not need to file this page. | To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay. | | | | |
| | You must list all your proper court. Even if you plan to pa in your schedules. If you do property or properly claim it also deny you a discharge case, such as destroying or cases are randomly audited Bankruptcy fraud is a seri | y a particular debt outsid not list a debt, the debt n as exempt, you may not f all your debts if you do hiding property, falsifying to determine if debtors h | e of your bankruptcy, you nay not be discharged. If be able to keep the proposionething dishonest in you records, or lying. Individate ave been accurate, truth | u must list that debt you do not list erty. The judge can your bankruptcy fural bankruptcy ful, and complete. | |
| | If you decide to file without a hired an attorney. The court successful, you must be fam Bankruptcy Procedure, and be familiar with any state ex | will not treat you differentialiar with the United State the local rules of the court | tly because you are filing es Bankruptcy Code, the t in which your case is fil | for yourself. To be Federal Rules of | |
| | Are you aware that filing for consequences? | bankruptcy is a serious a | ction with long-term finar | icial and legal | |
| · | Yes Are you aware that bankrupt | ov fraud is a sprious crim | e and that if your hanker | otcy forms are | |
| | inaccurate or incomplete, yo No Yes | | | picy termoralis | |
| · | Did you pay or agree to pay No Yes. Name of Person | someone who is not an a | ittorney to help you fill ou | t your bankruptcy forms? | |
| • • | Attach Bankruptcy Pe | tition Preparer's Notice, De | . · · · · · · · · · · · · · · · · · · · | Official Form 119). | |
| · • | By signing here, I acknowled have read and understood the attorney may cause me to look | is notice, and I am aware se my rights or property it | e that filing a bankruptcy of the filing a bankr | case without an | |
| | Signature of Debtor 1 Date MM / DD / YYYY | 2017 | Signature of Debtor 2 Date MM / E | DD / YYYY | |
| | Contact phone 334 | - 215-1846 | Collabora | | |
| | Cell phone | | Cell phone Email address | No. 10 P. St. Co. | |

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| Fill in this information to | identify your case: | | |
|--|---------------------------------|-----------|-------------------------------------|
| Debtor 1 First Name | AVC Middle Name | Wax. | |
| Debtor 2 (Spouse, if filing) First Name | Middle Name | Last Name | |
| United States Bankruptcy Coun | t for the: Northern District of | Illinois | |
| Case number (If known) | | | ☐ Check if this is a amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| your original forms, you must fill out a new Summary and check the box at the top of the | nis page. |
|--|--|
| Part 1: Summarize Your Assets | |
| | Yourassets |
| | Vajilejof what you own |
| Schedule A/B: Property (Official Form 106A/B) | A STATE OF THE PARTY OF THE PAR |
| 1a. Copy line 55, Total real estate, from Schedule A/B | \$ |
| 1b. Copy line 62, Total personal property, from Schedule A/B | <u>\$ 1360</u> |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$ 1300 |
| Part 2: Summarize Your Liabilities | |
| | |
| | Your liabilities. |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of | f Part 1 of Schedule D |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | 7076 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/ | F |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule | + s 1/)725 |
| | Your total liabilities \$ 18,75] |
| | |
| Part 3: Summarize Your Income and Expenses | |
| | 1100 |
| Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | s [000 |
| | |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | . 1250 |
| July | *** |
| | |
| | |

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Part 4: Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

Case 17-11087 Doc 1 Filed 04/07/17 Entered 04/07/17 14:08:15 Page 10 of 56 Document Fill in this information to identify your case and this filing: Debtor 1 Debtor 2 (Spouse, if filing) First Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims of exemptions. Put ☐ Single-family home the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? ☐ Land Investment property ☐ Timeshare Describe the nature of your ownership City State ZIP Code interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local Reliant property identification number: If you own or have more than one, list here: Do not deduct secured claims or exemptions. Put What is the property? Check all that apply. ☐ Single-family home the amount of any secured claims on Schedule D: Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? ☐ Land ☐ Investment property Describe the nature of your ownership Timeshare City ZIP Code interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one.

County

Debtor 1 and Debtor 2 only

At least one of the debtors and another

property identification number:

Other information you wish to add about this item, such as local

Debtor 1 only
Debtor 2 only

Check if this is community property

(see instructions)

| · · · · · · · · · · · · · · · · · · · | /\ | What is the property? Check all that apply. | | |
|--|-----------------------------------|--|--|--|
| 1.3, | | Single-family home | the amount of any sec | d claims or exemptions. Tired claims on Schedul |
| Street address, if available, or other de | lescription | Duplex or multi-unit building | Creditors Who Have (| Claims Secured by Prope |
| | | Condominium or cooperative | Current value of ti entire property? | ne Current value o portion you ow |
| | · | ☐ Manufactured or mobile home☐ Land | \$ | \$ |
| | | ☐ Investment property | | |
| City State | ZIP Code | Timeshare | Describe the natur | e of your ownership |
| | | ☐ Other | interest (such as for the entireties, or a | ee simple, tenancy i life estate), if know |
| | | Who has an interest in the property? Check one | | ,, |
| | | Debtor 1 only | * 1 | |
| County | | Debtor 2 only | | |
| | | Debtor 1 and Debtor 2 only | ☐ Check if this is | |
| | | At least one of the debtors and another | (see instructions |) . |
| | | Other information you wish to add about this property identification number: | | |
| dd the dollar value of the portion you. Ou have attached for Part 1. Write tha | ı own for al at number b | l of your entries from Part 1, including any entri nere. | ies for pages | \$ <i>></i> |
| V - 111 - 11 | ` | | • | |
| | | | | |
| | | | المراجع | 建 分析 |
| 2 Describe Your Vehicles | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | of the state of th |
| wn that someone else drives. If you leas | se a vehicle | t in any vehicles, whether they are registered or , also report it on Schedule G: Executory Contracts | r not? Include any vehicle s and Unexpired Leases. | |
| own that someone else drives. If you leas | se a vehicle | , also report it on Schedule G: Executory Contracts | s and Unexpired Leases. | i Marian |
| ou own, lease, or have legal or equitation that someone else drives. If you leasure, vans, trucks, tractors, sport utility No Yes | se a vehicle | , also report it on Schedule G: Executory Contracts | s and Unexpired Leases. | i Marian |
| wn that someone else drives. If you leas ars, vans, trucks, tractors, sport utility No Yes | se a vehicle y vehicles, | , also report it on Schedule G: Executory Contracts motorcycles | s and Unexpired Leases. | e na eu Anemous n |
| wn that someone else drives. If you leas ars, vans, trucks, tractors, sport utility No Yes Make: | se a vehicle y vehicles, | , also report it on Schedule G: Executory Contracts motorcycles Who has an interest in the property? Check one. | Do not deduct secured to | ains or exemptions. Pu |
| wn that someone else drives. If you leasers, vans, trucks, tractors, sport utility No I Yes 1. Make: Model: | se a vehicle y vehicles, | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | s and Unexpired Leases. Do not deduct secured c | ains or exemptions. Pu |
| wn that someone else drives. If you leasure, vans, trucks, tractors, sport utility No Yes Make: Model: Year: | se a vehicle y vehicles, | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct sectined of the amount of any securic Creditors Who Have Cala | aims or exemptions. Pu dictains on Schedule ins Secured by Propert Current value of |
| wn that someone else drives. If you leasure, vans, trucks, tractors, sport utility No Yes Make: Model: Year: Approximate mileage: | se a vehicle y vehicles, | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secting of the amount of any secting Creditors Who Have Clai | aims or exemptions. Pu dictains on Schedule ins Secured by Propert Current value of |
| wn that someone else drives. If you leasure, vans, trucks, tractors, sport utility No Yes Make: Model: Year: | se a vehicle y vehicles, | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do not deduct sectined of the amount of any securic Creditors Who Have Cala | aims or exemptions. Pu dictains on Schedule ins Secured by Propert Current value of |
| wn that someone else drives. If you leasure, vans, trucks, tractors, sport utility No Yes Make: Model: Year: Approximate mileage: | se a vehicle y vehicles, | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct sectined of the amount of any securic Creditors Who Have Cala | aims or exemptions. Production of the control of th |
| wn that someone else drives. If you lease ars, vans, trucks, tractors, sport utility. No I Yes 1. Make: Model: Year: Approximate mileage: | se a vehicle y vehicles, | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct sectined of the amount of any securic Creditors Who Have Cala | aims or exemptions. Production of the control of th |
| ars, vans, trucks, tractors, sport utility No I Yes Make: Model: Year: Approximate mileage: Other information: | se a vehicle y vehicles, | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct sectined of the amount of any securic Creditors Who Have Cala | aims or exemptions. Production of the control of th |
| ars, vans, trucks, tractors, sport utility No Yes Make: Model: Year: Approximate mileage: Other information: | se a vehicle y vehicles, | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? | ams or exemptions. Production of the secured by Properties Secured |
| ars, vans, trucks, tractors, sport utility No Yes Make: Approximate mileage: Other information: Ou own or have more than one, described Make: Make: Make: | se a vehicle y vehicles, | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? | ams or exemptions. Pudiciples of Schedule in Schedule in Secured by Propert Current value of portion you own |
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| wn that someone else drives. If you lease ars, vans, trucks, tractors, sport utility. No Yes Make: Model: Year: Approximate mileage: Other information: Make: Model: Year: Approximate more than one, described. Make: Model: Year: Approximate mileage: | se a vehicle y vehicles, e here: | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another | Do not deduct secured of the amount of any secure Creditors Who Have Clair Creditors Who Have Clair Entire property? \$ Do not deduct secured clair the amount of any secure Creditors Who Have Clair Current value of the entire property? | ams or exemptions. Pudicialms for exemptions or exemption you own S |

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|---------------------------------------|--|--|---|--|
| . 1.7 | Jaka- | Who has an interest in the property? Check one. | Do not deduct secured | claime or examplions P |
| 3. IVI | lake: | Debtor 1 only | the amount of any secu | red claims on Schedule |
| M | lodel: | Debtor 2 only | Creditors Who Have Cl | aims Secured by Proper |
| Ye | ear: | Debtor 1 and Debtor 2 only | Current value of the | Current value of |
| Αr | pproximate mileage: | At least one of the debtors and another | entire property? | portion you own |
| - | ther information: | At least one of the debtors and another | • | |
| | the momation. | ☐ Check if this is community property (see | \$ | \$ |
| | 10 44 10 44 10 44 10 | instructions) | * N : - P | |
| L. | | | i i ti | • |
| N.4. | aka: | Who has an interest in the property? Check one. | Do not deduct secured of | raime or everantions. D |
| , Ma | ake: | Debtor 1 only | the amount of any secur | ed claims on Schedule |
| ivid | odel: | Debtor 2 only | Creditors Who Have Cla | ims Secured by Propen |
| Υe | ear: | _ | Current value of the | Current value of |
| An | oproximate mileage: | Debtor 1 and Debtor 2 only | entire property? | portion you own |
| | | At least one of the debtors and another | • | |
| Ot | ther information: | | \$ | \$ |
| | • | Check if this is community property (see instructions) | | |
| | | matructions; | | |
| | | | | |
| | - | | | |
| mple. | | s and other recreational vehicles, other vehicles, and acces al watercraft, fishing vessels, snowmobiles, motorcycle accesso | | |
| | | | | |
| mple. No | | | ories | Southern Money (SC) |
| mple. No Yes | | | Do not deduct secured co | laims or exemptions. Pr |
| mple. No Yes Ma | s: Boats, trailers, motors, persona | al watercraft, fishing vessels, snowmobiles, motorcycle accesso | Do not deduct secured co | aims or exemptions. P |
| mple. No Yes Ma Mo | s: Boats, trailers, motors, persona ake: | al watercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. | Do not deduct secured co the amount of any secure Creditors Who Have Ca | aims or exemptions. Po ad Gaims on Schedule ms:Secured by Propert |
| mple. No Yes Ma | s: Boats, trailers, motors, persona ake: | al watercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured c the amount of any secure Creditors Who Have Clai | aims or exemptions. Pr d claims on Schedule ms Secured by Propert |
| mple: No Yes Ma Mo Ye: | s: Boats, trailers, motors, persona ake: | al watercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured co the amount of any secure Creditors Who Have Ca | aims of exemptions. Po d claims on Schedule ms Secured by Propert Current value of |
| mple: No Yes Ma Mo Ye: | s: Boats, trailers, motors, persona ake: odel: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do not deduct secured control amount of any secure Creditors Who Have Clair | aims of exemptions. Production of Claims on Schedule in Secured by Propertion of Current value of |
| nple. lo 'es Ma Mo Ye: | s: Boats, trailers, motors, persona ake: odel: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured control amount of any secure Creditors Who Have Clair | aims of exemptions. Production of Claims on Schedule in Secured by Propertion of Current value of |
| nple. lo 'es Ma Mo Ye: | s: Boats, trailers, motors, persona ake: odel: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do not deduct secured of the amount of any secure Creditors Who Have Call Current value of the entire property? | aims of exemptions. Produced Galams on exemptions. Produced by Proper Current value of portion you own |
| mple: No Yes Ma Mo Ye: | s: Boats, trailers, motors, persona ake: odel: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? | aims of exemptions. Pad Galms on Schedule ms Secured by Propen Current value of portion you own \$ |
| Mo Yes Mo Ye: | s: Boats, trailers, motors, persona ake: odel: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured of the amount of any secure Creditors Who Have Call Current value of the entire property? | aims of exemptions. Placed Galams on exemptions. Placed Galams on Schedule in Secured by Proper Current value of portion you own |
| Ma Ma Oth | s: Boats, trailers, motors, personal ake: odel: ar: her information: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? | aims of exemptions. Post claims on exemptions. Post claims on Schedule in Secured by Propert Current value of portion you own |
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| Ma Ma | s: Boats, trailers, motors, personal ake: odel: ar: her information: n or have more than one, list here ke: del: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured cithe amount of any secure Creditors Who Have Cal Current value of the entire property? \$ | Current value of portion you own |
| Ma Moory Yea | s: Boats, trailers, motors, personal ake: ake: odel: ar: her information: n or have more than one, list here ke: del: ar: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | Do not deduct secured cities amount of any secure Creditors Who Have Clair Current value of the entire property? \$ | aims of exemptions. Pud Galams on Schedule in Secured by Propert Current value of portion you own \$ |
| Ma Moory Yea | s: Boats, trailers, motors, personal ake: odel: ar: her information: n or have more than one, list here ke: del: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clair the amount of any secure Creditors Who Have Clair Current value of the | aims of exemptions. Public Galms on Schedule in Secured by Propert Current value of portion you own \$ |

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

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Case number (it known)

| Part 3: Describe Your Personal and Household Items | |
|---|---|
| Do you own or have any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware | M BESTERONIE SON VIVIII |
| Pres Describe bed, comforte applicate | s_400 |
| 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games | |
| Yes. Describe |] \$(00 |
| 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles | |
| Yes. Describe | \$ |
| Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe | \$ |
| 0. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe | \$ |
| 1. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No No Yes. Describe | s_300_ |
| Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe | \$ |
| Examples: Dogs, cats, birds, horses | |
| ☐ Yes. Describe | \$ |
| Any other personal and household items you did not already list, including any health aids you did not list | |
| monration, | \$ |
| Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here | s \300 |





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Describe Your Financial Assets

| Do you own or have an | y legal or equitable interest in | any of the following? | 一直 | Current value of the |
|--------------------------------------|---|---|------------------------------------|--|
| | | | | portion you own? |
| | | | | or exemptions. |
| 16. Cash Examples: Money you | ı have in your wallet, in your ho | me, in a safe deposit box, and on hand when | you file your petition | |
| D No | | | | |
| ☐ Yes | | | Cash: | \$ |
| | | | | |
| 17. Deposits of money | | | • | |
| Examples: Checking, s and other s | savings, or other financial acco similar institutions. If you have r | unts; certificates of deposit; shares in credit unuffice accounts with the same institution, lise | inions, brokerage houses t each | entre de la companya della companya della companya della companya de la companya della companya |
| D No | · | , | \$ \$ 1 | and the second s |
| ☐ Yes | | Institution name: | | • |
| | 17.1 Chapting page into | | | _ |
| | 17.1. Checking account: | *************************************** | | <u> </u> |
| | 17.2. Checking account: | | | \$ |
| | 17.3. Savings account: | | | \$ |
| | 17.4. Savings account: | | · • • • | \$ <u>\$</u> |
| | 17.5. Certificates of deposit: | | | \$ |
| | 17.6. Other financial account: | | | \$ <u></u> |
| , | 17.7. Other financial account: | | | \$ |
| | 17.8. Other financial account: | | d · | \$ |
| | 17.9. Other financial account: | \ | | \$ |
| | | | | |
| | | | Ţ. | |
| | or publicly traded stocks investment accounts with broke | erage firms, money market accounts | | |
| No | and desired that bloke | rage inno, money market accounts | | |
| ☐ Yes | Institution or issuer name: | | | |
| | | | | \$ |
| | 4444 | | | * \$ |
| | | | | \$ |
| | | | | · · · |
| . Non-publicly traded sto | ock and interests in incornor | ated and unincorporated businesses, inclu | iding an interest in | • |
| an LLC, partnership, ar | nd joint venture | acca and animosiporated pusitiesses, mete | dung an interest in | |
| No No | Name of entity: | | % of ownership: | |
| Yes. Give specific information about | | | 0%% | \$ |
| them | | Vol. 1 | 0% % | \$ |
| | | | % | \$ |
| | | | | |
| | a fine of the second common common to the second | | | |

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| 20. Government and cor | porate bonds and otl | ner negotiable and non-negotiable instruments | j | , ' | |
|-------------------------------|--|--|------|----------------|------------|
| Negotiable instrument. | s include personal che | cks, cashiers' checks, promissory notes, and money orders. | | ÷ | |
| Non-negotiable instrur | nents are those you ca | annot transfer to someone by signing or delivering them. | | | |
| r\$ | | | | | |
| No No | | | | | |
| Yes. Give specific | Issuer name: | | | | |
| information about | | | | | |
| them | | | | | \$ |
| | | | | | \$ |
| | | | | | . e |
| | | | į | | φ |
| | | | | į. | |
| 21. Retirement or pension | n accounts | | | ř | |
| Examples: Interests in | IRA, ERISA, Keogh, 4 | 01(k), 403(b), thrift savings accounts, or other pension or profit-sharing | plan | s | |
| -9-No | | • | • | | |
| | | | | | |
| Yes. List each | - , , | A | | | |
| account separately. | Type of account: | Institution name: | • | | |
| | 401(k) or similar plan: | | • | | • |
| | 401(K) Of Similar plan. | | | | · . |
| | Pension plan: | | | V- | \$ |
| | | | | ÷ . | |
| | IRA: | | | | \$ |
| | Retirement account: | | | | • |
| | remement account | | | | \$ |
| | Keogh: | | | | \$ |
| | | | | | |
| | Additional account: | | | | \$ |
| | Additional account: | | • | | • |
| | Additional account. | | | | \$ |
| | | · | , | | |
| | | | : | | |
| 22. Security deposits and | | | | | |
| Your share of all unused | l deposits you have ma | ade so that you may continue service or use from a company | | | |
| Examples: Agreements | with landlords, prepaid | rent, public utilities (electric, gas, water), telecommunications | | | |
| companies, or others | | | | | |
| No. | | | | | |
| | | | | | |
| ☐ Yes | Inst | itution name or individual: | , | | |
| | Electric: | • | | | ^ |
| | _ | | | | 3 |
| | Gas: | | | | \$ |
| | Heating oil: | , | | | * |
| | | | | | <u> </u> |
| | Security deposit on renti | al unit: | | : | \$ |
| | Prepaid rent: | | | ٠. | |
| • | Talashana | | | • |) <u> </u> |
| | Telephone: | | | : | 5 _ |
| | | | | | |
| | Water: | | | | |
| | | | | , | |
| | Water: | | | • | |
| | | | | \$ | S |
| | Rented furniture: | | | \$ | |
| | Rented furniture: | | - | \$ | S |
| 23. Annuities (A contract for | Rented furniture: Other: | | - | \$ | S |
| ~~ · · · | Rented furniture: Other: | | - | \$ | S |
| ₩ No | Rented furniture: Other: | | | \$ | S |
| No No | Rented furniture: Other: | money to you, either for life or for a number of years) | - | \$ | S |
| ₩ No | Rented furniture: Other: a periodic payment of | money to you, either for life or for a number of years) | - | \$ | 5 |
| ₩ No | Rented furniture: Other: a periodic payment of | money to you, either for life or for a number of years) | - | \$ | S |
| ™ No | Rented furniture: Other: a periodic payment of | money to you, either for life or for a number of years) | | \$ | 5 |
| ₩ No | Rented furniture: Other: a periodic payment of | money to you, either for life or for a number of years) | | \$ \$ \$ \$ \$ | |

Debtor 1 Middle Name

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Case number (// known)

| Thase Tritton |) (|
|---------------|-----|
| 11 10 . 1 | |
| HATWAIA | |
| INVIV. | |

Last Name

Case number (if known)

| 24 Interests in an education IRA, in an account in a qualified ABLE pro 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | ogram, or under a qualified state tuition program. |
|--|--|
| Yes Institution name and description. Separa | ately file the records of any interests.11 U.S.C. § 521(c): |
| | |
| | |
| | \$ |
| | 5 |
| 25. Trusts, equitable or future interests in property (other than anything exercisable for your benefit | g listed in line 1), and rights or powers |
| No No | |
| ☐ Yes. Give specific | |
| information about them | \$ |
| 26. Patents, copyrights, trademarks, trade secrets, and other intellectu Examples: Internet domain names, websites, proceeds from royalties ar | al property ad licensing agreements |
| Yes. Give specific information about them | \$ |
| | |
| 27. Licenses, franchises, and other general intangibles | haldings liggestices and professional ligges |
| Examples: Building permits, exclusive licenses, cooperative association | noldings, liquol licenses, professional licenses |
| No | |
| Yes. Give specific information about them | \$ |
| mornation about thorn | |
| Money or property owed to you? | Current value of the portion you own? Donot deduct secured claims on exemptions. |
| 28. Tax refunds owed to you | |
| No | |
| Yes. Give specific information | Co-do-not |
| about them, including whether | Federal: |
| you already filed the returns and the tax years. | State: |
| and the tax years, | Local: • |
| Name of a state of the state of | |
| 29. Family support | |
| Examples: Past due or lump sum alimony, spousal support, child suppor | t, maintenance, divorce settlement, property settlement |
| DNO | |
| Yes. Give specific information | Alimony: \$ |
| | Maintenance: \$ |
| | Support: \$ |
| | Divorce settlement: \$ |
| | Property settlement: \$ |
| | Annual teach of the second sec |
| 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability bene Social Security benefits; unpaid loans you made to someone | fits, sick pay, vacation pay, workers' compensation, else |
| Yes, Give specific information | |
| | \$ |
| | |

| 31. Interests in insurance policies Examples: Health, disability, or life insura | ance; health savings account (HS | 6A); credit, homeowner's, or renter's insura | nce |
|---|---|---|---|
| Yes. Name the insurance company of each policy and list its value. | Company name: | Beneficiary: | Surrender or refund value |
| , , | | | \$ |
| | | | · \$ |
| | | | |
| Property because someone has died. | expect proceeds from a life insur | rance policy, or are currently entitled to reco | è : : : : : : : : : : : : : : : : : : : |
| ☐ Yes. Give specific information | | | \$ |
| 33. Claims against third parties, whether of Examples: Accidents, employment disputed. | es, insurance claims, or rights to | or made a demand for payment sue | |
| Yes, Describe each claim | | | |
| 34. Other contingent and unliquidated claim to set off claims | ns of every nature, including c | ounterclaims of the debtor and rights | \$ |
| Yes. Describe each claim | | | |
| L | | | \$ |
| 35. Any financial assets you did not already | list | | |
| ☐ Yes. Give specific information | e e e e e e e e e e e e e e e e e e e | | |
| 36. Add the dollar value of all of your entries for Part 4. Write that number here | ••••• | | → [s |
| | elated Property You Ov | vn or Have an Interest In. List a | any real estate in Part 1. |
| 37. Do you own or have any legal or equitabl | | | |
| No. Go to Part 6. | e interest in any business-rela | teu property? | |
| Yes. Go to line 38. | | | |
| | | | Current value of the portion you,own? Do not deduct secured claims or exemptions: |
| 88. Accounts receivable or commissions you | already earned | | The second of t |
| No | | | |
| Yes. Describe | | | |
| Office equipment, furnishings, and suppli Examples: Business-related computers, software, r | es nodems, printers, copiers, fax machin | ies ruos telenhones desks chairs electronic de | P. |
| No No | | 5-1 maphiotos, suono, ondiro, electronic de | January 1 |
| Yes. Describe | | | <u> </u> |
| | | | P |

| Debtor 1 | Se 17-11087 Doc 17 Filed 04/07/17 Entered 04/07/17 14.08.13 Document Page 18 of 56 unber (if known) |) L | Jesc Main |
|--------------------------|--|--------------|--|
| First Name | Middle Name Last Name | · . | |
| 40 Machinese Fixture | | ٤. | The Control of the Co |
| No No | s, equipment, supplies you use in business, and tools of your trade | | |
| · · | | | 7 |
| Yes. Describe | | | \$ |
| | | | |
| 41. Inventory | | | |
| No No | | | <u> </u> |
| Yes. Describe | ! | 1 | \$ |
| | | · · · · · · | |
| 42. Interests in partner | ships or joint ventures | | |
| O No | • • | | |
| Yes. Describe | Name of entity: % of owners | shin: | |
| | | mp. | |
| | | | \$ |
| | | : | \$ |
| | | | Ψ |
| 43. Customer lists, mai | iling lists, or other compilations | | |
| D No | | | |
| Yes. Do your list | ts include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | | |
| ☐ No | | | |
| Yes. De | scribe | ************ |]_ |
| | | | \$ |
| 44 Any husiness-relate | ed property you did not already list | | _ |
| No | a property you did not already list | • | |
| Yes. Give specifi | c | | • |
| information | | • | 3 |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| | | ٠. | • |
| | | : | • |
| | of all of your entries from Part 5, including any entries for pages you have attached | _ | s |
| for Part 5. Write that | t number here | . → | |
| | | | |
| | | | |
| | Any Farm- and Commercial Fishing-Related Property You Own or Have an Intere or have an interest in farmland, list it in Part 1. | st in. | |
| n you own | | | |
| 6. Do you own or have | any legal or equitable interest in any farm- or commercial fishing-related property? | | : |
| No. Go to Part 7. | any reason or equinated interest in any runner or commercial naming-related property? | | |
| Yes. Go to line 47 | | | |
| | | Ì | Current value of the |
| | | | portion you own? |
| | | | Do not deduct secured claims |
| 7. Farm animals | | i | or exemptions. |
| Examples: Livestock, | poultry, farm-raised fish | | |
| M No | | | į |
| ☐ Yes | | | |
| | | | f - 1 |

Document Page 19 of 56 Debtor 1 Case number (if known) 48. Crops—either growing or harvested D-No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed D No Yes..... 51. Any farm- and commercial fishing-related property you did not already list MO D ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached \Diamond for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 D 60. Part 6: Total farm- and fishing-related property, line 52 0 61. Part 7: Total other property not listed, line 54 62. Total personal property. Add lines 56 through 61. Copy personal property total -> 63. Total of all property on Schedule A/B. Add line 55 + line 62.

Schedule A/B: Property

Doc 1,

Official Form 106A/B

Filed 04/07/17

Entered 04/07/17 14:08:15

Case 17-11087 Doc 1 Filed 04/07/17 Entered 04/07/17 14:08:15 Desc Main Page 20 of 56 Document Fill in this information to identify your case: Debtor 1 Middle Name Debtor 2 Last Name Middle Name (Spouse, if filing) First Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an amended filing Case number (If known) Official Form 106C Schedule C: The Property You Claim as Exempt 04/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. **Identify the Property You Claim as Exempt** Part 1: Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Specific laws that allow exemption Amount of the exemption you claim Current value of the Brief description of the property and line on portion you own Schedule A/B that lists this property Check only one box for each exemption. Copy the value from Schedule A/B Brief 100% of fair market value, up to description: any applicable statutory limit Line from Schedule A/B: Brief description: 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B. Brief 100% of fair market value, up to description: any applicable statutory limit Line from Schedule A/B: 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Schedule C: The Property You Claim as Exempt

No Yes

page 1 of ___

Doc 1 Filed; 04/07/17 Entered 04/07/17 14:08:15 Desc Main Page 21 6fs56 mber (# known)

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exempt |
|---|--|---|---------------------------------|
| | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief | | | NAMA AN A |
| description: Line from Schedule A/B: | - | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | \$ 100% of fair market value, up to | |
| Line from Schedule A/B: | | any applicable statutory limit | |
| Brief description: | \$ | ☐ \$ ☐ 100% of fair market value, up to | |
| Line from Schedule A/B: | | any applicable statutory limit | |
| Brief description: | \$ | ☐ \$ ☐ 100% of fair market value, up to | |
| Line from Schedule A/B: | | any applicable statutory limit | |
| Brief description: | \$ | ☐ \$ ☐ 100% of fair market value, up to | 11 10 10 10 |
| Schedule A/B: | | any applicable statutory limit | |
| Brief description: | \$ | \$ \$ 100% of fair market value, up to | |
| Line from Schedule A/B: | an a | any applicable statutory limit | |
| Brief description: | \$ | \$\$ 100% of fair market value, up to | |
| ine from Schedule A/B: | | any applicable statutory limit | |
| Brief description: | \$ | \$ 100% of fair market value, up to | |
| ine from Schedule A/B: ——— | | any applicable statutory limit | |
| Brief description: | \$ | O \$ | |
| ine from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | <u>. v</u> |
| Brief lescription: | \$ | ** | |
| ine from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief escription: | \$ | \$ \$ 100% of fair market value, up to | |
| ine from Schedule A/B: | | any applicable statutory limit | |
| Brief escription: | \$ | \$ | |
| ine from | | 100% of fair market value, up to any applicable statutory limit | |

Case 17-11087 Doc 1 Filed 04/07/17 Entered 04/07/17 14:08:15 Desc Main 22 of 56 Fill in this information to identify your case: Debtor 1 Debtor 2 Last Name Middle Name (Spouse, if filing) First Name United States Bankruptcy Court for the: Northern District of Illinois Case number Check if this is an (If known) amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. ☐ Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately Value of collateral Amount of claim Unsecured for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. that supports this As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 Describe the property that secures the claim: Creditor's Name Mumber Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated State ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured Debtor 1 only car loan) Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) Check if this claim relates to a community debt Last 4 digits of account number Date debt was incurred 2.2 Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated State ZIP Code City Disputed Who owes the debt? Check one Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured Debtor 1 only car loan) Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) Check if this claim relates to a community debt

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

Date debt was incurred

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| Çaş | e 177, 111087 | Doc A |
|-----------|---------------|-----------|
| irst Name | Middle Name | Last Name |

| Additional Page Part 1: After listing any entries on this by 2.4, and so forth. | page, number them beginning with 2.3, followed | Column At Amount of Claim & Doingt deduct they value of collateral | that supports th | a) Unsecured is portion |
|---|--|--|--------------------------------------|--|
| | Describe the property that secures the claim: | \$ | \$ | \$ |
| Creditor's Name | | 7 | | |
| Number Street | | | | |
| | As of the date you file, the claim is: Check all that apply | | | The state of the s |
| City State ZIP Code | Contingent Unliquidated Disputed | ; | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | . 1 | |
| Debtor 1 only | An agreement you made (such as mortgage or secured | | | |
| Debtor 2 only | car loan) Statutory lien (such as tax lien, mechanic's lien) | i i | ; | |
| Debtor 1 and Debtor 2 only | Judgment lien from a lawsuit | | | |
| At least one of the debtors and another | Other (including a right to offset) | _ | | |
| ☐ Check if this claim relates to a community debt | , , , , , , , , , , , , , , , , , , , | | | |
| Date debt was incurred | Last 4 digits of account number | | | · · · · · · · · · · · · · · · · · · · |
| | Describe the property that secures the claim: | \$ | \$ | \$ |
| Creditor's Name | | 7 | | |
| | | | Parameter Comment | |
| Number Street | A fit January fits the afairm in Charle all that control | | 11 | |
| | As of the date you file, the claim is: Check all that apply. Contingent | | | |
| | Unliquidated | a. | | |
| City State ZIP Code | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | An agreement you made (such as mortgage or secured) | | | |
| Debtor 2 only | car loan) | | 4. 4. | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| Check if this claim relates to a community debt | Other (including a right to offset) | . | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| | Describe the property that secures the claim: | s | \$ | \$ |
| Creditor's Name | Describe the property that secores are significant | 7 | * | |
| | | | | |
| Number Street | | | • | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| | ☐ Contingent | | | |
| City State ZIP Code | Unliquidated | | | |
| | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | An agreement you made (such as mortgage or secured | | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| Add the dollar value of your entries | in Column A on this page. Write that number here: | \$ | | |
| | add the dollar value totals, from all nages | | | |

Write that number here:

nt

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Debtor t

| Casi | C 11-11001 | DUC I | 1 11Cu 0 4 /0 |
|------|-------------|-----------|--------------------------|
| | 1 | | Docume |
| /TY | 1 Ponce | | NW |
| lame | Middle Name | Last Name | |

Case number (if known)_

Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection

| | | | On which line in Part 1 did you enter the creditor? |
|--------|---|---|--|
| | | | Last 4 digits of account number |
| | | | |
| Street | | | |
| | | | |
| | Slate | ZIP Code | <u>.</u> |
| | | | On which line in Part 1 did you enter the creditor? |
| | ······································ | | Last 4 digits of account number |
| C) | | | |
| Street | | | |
| | | | _ |
| | State | ZIP Code | <u>-</u> |
| | | | On which line in Part 1 did you enter the creditor? |
| | | | Last 4 digits of account number |
| | | | |
| Street | | | |
| | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| | State | ZIP Code | - |
| | | *************************************** | On which line in Part 1 did you enter the creditor? |
| | | | Last 4 digits of account number |
| | ` | | |
| Street | | | : |
| | | | |
| | State | ZIP Code | - |
| | | | On which line in Part 1 did you enter the creditor? |
| | | | Last 4 digits of account number |
| | | | |
| Street | | | - |
| | | | |
| | Cinta | 7ID Codo | - |
| | State | ZIP Code | |
| | | | On which line in Part 1 did you enter the creditor? |
| | | | Last 4 digits of account number |
| Street | | | • |
| | | | · |
| | *************************************** | | $oldsymbol{t}$ |
| | Street Street Street | Street State State State State State State State | Street State ZIP Code State ZIP Code State ZIP Code State ZIP Code |

| | 2.17-11087 Doc n to identify your case: | 1 Filed 04/07/17 | Entered 04/07/17 14:0 | 08:15 Desc Main |
|---|--|---|---|--|
| | rto identity your case. | - (1) | .5 01 50 | |
| Debtor 1 First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) First Name | Middle Name | Last Name | | |
| | Court for the: Northern Dis | trict of Diinois | | |
| | Court of the. Northern Dis | RIPECOT INTIOIS | | ☐ Check if this is an |
| Case number (If known) | | | | amended filing |
| Official Form 1 | 106E/F | 10. (N. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10 | | |
| Schedule E | F: Creditors | Who Have Ur | secured Claims | 12/15 |
| List the other party to a A/B: Property (Official Foreditors with partially needed, copy the Part y any additional pages, w | iny executory contracts Form 106A/B) and on So secured claims that are you need, fill it out, num | or unexpired leases that co hedule G: Executory Contra listed in Schedule D: Credit ber the entries in the boxes e number (if known). | ould result in a claim. Also list ex acts and Unexpired Leases (Offic fors Who Have Claims Secured I | cial Form 106G). Do not include any |
| 100 T 100 S () () () () () () () () () (| | | | |
| 1. Do any creditors ha No. Go to Part 2. | ve priority unsecured ci | aims against you? | | |
| Yes. | itu unangurad alaime d | a craditar has more than one | priority unsecured claim, list the c | reditor separately for each claim. For |
| each claim listed, ider nonpriority amounts. | ntify what type of claim it i As much as possible, list | s. If a claim has both priority a the claims in alphabetical orde | and nonpriority amounts, list that cl | aim here and show both priority and . If you have more than two priority |
| | • | the instructions for this form in | • | (the other cascillation) |
| | • | | Principal de la companya del companya de la companya del companya de la companya | otal Galm Priority Nonpriority |
| 21 Cova Re | Conducate he | r AC | 0049 | amount amount :: |
| Priority Creditor's Name | Corder at De | Last 4 digits of accoun | t number $\frac{1}{2} \frac{1}{2} \frac{1}$ | 5 /4 s / /4 s |
| 118 N | Clark | When was the debt inc | urred? <u>3/10</u> // | |
| Number Street 2 | 30 | As of the date you file | the claim is: Check all that apply. | |
| Chica | 10 76 60 | Contingent | the claim is. Oneon an mat apply. | |
| City | State ZIP Code | Unliquidated | | |
| Who incurred the de | bt? Check one. | Disputed | | |
| Debtor 2 only | | Type of PRIORITY uns | secured claim: | |
| Debtor 1 and Debto | or 2 only | ☐ Domestic support oblig | | |
| At least one of the | debtors and another | | er debts you owe the government | • |
| Check if this clair | m is for a community deb | t Claims for death or pe | rsonal injury while you were | |
| is the claim subject | to offset? | intoxicated | Kle | V. |
| □ No - ③ Yes | | Other, Specify | ······································· | |
| | acc Accordia | ter | | 18 23 |
| .2 Priority Cregitor's Name | 055 ASSOCIE | Last 4 digits of account | number 1 C 2 U \$_ | <u>0</u> <u>\$ 0 _ \$</u> |
| 4 Univ | esal Way | When was the debt incu | ırred? | • |
| Number Street | / | As of the date you file, t | the claim is: Check all that apply. | |
| Tarlasanin | MT 497 | √2 □ Contingent | | |
| City | State ZIP Code | Unliquidated | | E Communication of the Communi |
| Who incurred the de | bt? Check one. | Disputed | | • |
| Debtor 1 only | | Type of PRIORITY uns | ecured claim: | |
| Debtor 2 only Debtor 1 and Debtor | r 2 natu | Domestic support oblig | ations | |
| At least one of the d | • | Taxes and certain other | r debts you owe the government | |
| | n is for a community deb | Claims for death or per intoxicated | sonal injury while you were | |
| Is the claim subject t | • | intoxicated | | |
| □ No ☑ Yes | | | | |
| | | | | |

| Your PRIORITY Unsecured Claims - | - Continuation Page | |
|--|--|---|
| r listing any entries on this page, number them b | | Total claim Priority Nonprior amount amount |
| CME | Last 4 digits of account number 6 29 6 | 5 622 5 6225 |
| Priority Creditor's Name International Phw | When was the debt incurred? 15(20/6 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| Caro I ton TX 7500+ State ZIP Code | Contingent Unliquidated Substitute Substitut | |
| Who incurred the debt? Check one. | Type of PRIORITY unsecured claim: | |
| Debtor 1 only Debtor 2 only | Domestic support obligations | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were | |
| ☐ Check if this claim is for a community debt | intoxicated Other. Specify | • |
| Is the claim subject to offset? | | |
| ☐ No Tyes | | |
| | Last 4 digits of account number 3838 | , 24/2, 24/2, |
| Convergent Outsourch | 11 //) 1/4 | |
| Number Street | When was the debt incurred? | |
| D. La WA agait | As of the date you file, the claim is: Check all that apply. | |
| City State ZIP Code | Contingent Unliquidated Disputed | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | Type of PRIORITY unsecured claim: | |
| Debtor 2 only Debtor 1 and Debtor 2 only | Domestic support obligations Taxes and certain other debts you owe the government | |
| At least one of the debtors and another | Claims for death or personal injury while you were | |
| ☐ Check if this claim is for a community debt | intoxicated Other. Specify | |
| is the claim subject to offset? | | |
| No Start Yes | | |
| | Last 4 digits of account number 8654 | s 192 s 192 s |
| Priority Credition Name 1 575 477 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| Tachemille 18 3224 | Contingent | |
| City State ZIP Code | ☐ Unliquidated ☐ Disputed | |
| Who incurred the debt? Check one. | Type of PRIORITY unsecured claim: | |
| Debtor 1 only Debtor 2 only | Domestic support obligations | |
| Debtor 1 and Debtor 2 only | Taxes and certain other debts you owe the government | |
| At least one of the debtors and another | Claims for death or personal injury while you were | |
| ☐ Check if this claim is for a community debt | intoxicated Other. Specify | |
| Is the claim subject to offset? | • | |
| ☐ No ☑ Yes | | |

Filed 04/07/17 Entered 04/07/17 14:08:15 Page 27 of 56 Debtor 1 Part 1: Your PRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim Priority Nonpriority amount amount Last 4 digits of account number 24 6 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ■ Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt CM WY Cach Other. Specify Is the claim subject to offset? ☐ No Yes Yes Last 4 digits of account number 0 5 3 6 s 1680 s 1680s As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Other. Specify Is the claim subject to offset? ☐ No Artra Recovers

| (A.) | MILL | , A | 6 600 | · U |
|---------------------|----------|-------|--------|----------|
| Priority Creditor's | Name 7 | 1716 | Cit | 4 4 |
| 130 | <u> </u> | | 71 | ∇ |
| Solf (1 | Tige! | 20 | | |
| Wich | uta | 1/5 | 167 | 205 |
| C.tu | | Ctoto | 710.00 | el m |

s 1/115 s 1/115 s

As of the date you file, the claim is: Check all that apply

| | Contingent |
|----|--------------|
| | Unliquidated |
| N. | -Disputed |

Who incurred the debt? Check one.

| É | eDebtor 1 only |
|---|---|
| | Debtor 2 only |
| | Debtor 1 and Debtor 2 only |
| | At least one of the debtors and another |

lacksquare Check if this claim is for a community debt

| Ту | Type of PRIORITY unsecured claim: | | | | |
|----|---|--|--|--|--|
| | Domestic support obligations | | | | |
| | Taxes and certain other debts you owe the government | | | | |
| | Claims for death or personal injury while you were intoxicated \ Other. Specify | | | | |
| * | intoxicated to a continuous | | | | |
| Ŋ | Other. Specify | | | | |

Is the claim subject to offset?

| | No |
|---|-----|
| 4 | Yes |

List All of Your NONPRIORITY Unsecured Claims

| 9868955 | | |
|---------|---|--|
| 3. | Do any creditors have nonpriority unsecured claims against you? | |
| | No. You have nothing to report in this part. Submit this form to the | court with your other schedules. |
| • | Yes | · · · · · · · · · · · · · · · · · · · |
| | | where a fish a graditor who holds each claim if a creditor has more than one |
| 4. l | ist all of your nonpriority unsecured claims in the alphabetical of | rder of the creditor who holds each claim. If a creditor has more than one For each claim listed, identify what type of claim it is. Do not list claims already |
| | nonpriority unsecured claim, list the creditor separately for each claim. | the other creditors in Part 3.If you have more than three nonpriority unsecured |
| | included in Part 1. If more than one creditor holds a particular claim, is | it the other cleanors in a lattern you and or the control of the c |
| | claims fill out the Continuation Page of Part 2. | |
| | | s Total claims |
| | City as Chicaro Drotal Revent | M No. |
| 4.1 | City of Chicago Deptar Remine | Last 4 digits of account number s 2-50 0 |
| | Nonpriority Creditoris Name | 5/2017 |
| | UN 160X X04554 | When was the debt incurred? |
| | Number. Street | |
| | Chicaso IV 60680 | |
| | City State ZIP Code | As of the date you file, the claim is: Check all that apply. |
| | City Sint Sint Sint Sint Sint Sint Sint Sint | |
| | | Contingent |
| | Who incurred the debt? Check one. | Unliquidated |
| | Debtor 1 only | Disputed |
| | Debtor 2 only | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: |
| | | |
| | At least one of the debtors and another | Student loans |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce |
| | Check if this class to a community | that you did not report as priority claims |
| | Is the claim subject to offset? | Debts to pension or profit-sharing plans, and other similar debts |
| | □ No | Other Specify Park (1) the Class |
| | S Yes | |
| | | TEND OF THE |
| 4.2 | Et timencial / Compass Bank | Last 4 digits of account number \$ \$ |
| | Nonpriority Creditor's Name | When was the debt incurred? |
| | in ph) Cuch palls Dr. | |
| | The second control of | |
| | Number Street | As of the date you file, the claim is: Check all that apply. |
| | Con State ZIP Code | |
| | City State ZIP Code | Contingent |
| | Who incurred the debt? Check one. | Unliquidated |
| | • | Disputed Disputed |
| | Debtor 1 only | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: |
| | Debtor 1 and Debtor 2 only | |
| | ☐ At least one of the debtors and another | Student loans |
| | Fig. at the state of the same and the state of the state | Obligations arising out of a separation agreement or divorce |
| | Check if this claim is for a community debt | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts |
| | Is the claim subject to offset? | |
| | □ No | Other. Specify |
| | Q Yes | |
| | | 371/5 1000 |
| 4.3 | Cook Law Manstrate | Last 4 digits of account number |
| | Nonpriority Creditor's Name | When was the debt incurred? 512016 |
| | 50 Wallanthy St Kmil | Wileii was the debt mouricu. |
| | Number Street | |
| | | |
| | City State ZIP Code | As of the date you file, the claim is: Check all that apply. |
| | City State ZIP Code | ☐ Contingent |
| | Who incurred the debt? Check one. | |
| | Debtor 1 only | Unliquidated |
| | | Disputed |
| | Debtor 2 only | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: |
| | At least one of the debtors and another | Student loans |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce |
| | Greek if this claim is for a community debt | that you did not report as priority claims |
| | Is the claim subject to offset? | Debts to pension or profit-sharing plans and other similar debts |
| | □ No | Other Specify Lasmy Management |
| | Yes | Officer, Specify |
| | | |

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Case number (if known)___

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Your NONPRIORITY Unsecured Claims - Continuation Page

| After listin | After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim | | | | |
|--|--|--|-------------|--|--|
| Det Det Det At k | Regulas Gas Invariant Street Street ALCASO State ZIP Code Accurred the debt? Check one. Potor 1 only Potor 2 only Potor 1 and Debtor 2 only Peast one of the debtors and another Pock if this claim is for a community debt Claim subject to offset? | Last 4 digits of account number | s le OV | | |
| S,2 Final Nonpriori | oth District Conthouse The Di | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. | <u> 300</u> | | |
| Debt Debt Debt At le | State ZIP Code curred the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and another ck if this claim is for a community debt | □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit sharing plans, and other similar debts □ Other. Specify | ; | | |
| Number City Who inco Debte Debte Debte Debte Chec | TSUD HYCLE (Ld) Street LD LD OUSS urred the debt? Check one. or 1 only | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student toans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other. Specify | s 300 | | |

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|----------------------------|-----------------------|------|
| Vous MONDPIODITY Uncocured | Claims - Continuation | Page |

| Afte | r listing any entries on this page, number them beginning with 4.4, | followed by 4.5, and so forth. | m |
|------|--|---|----------|
| Cell | Chex Systems | Last 4 digits of account number $\frac{7616}{160}$ | <u>)</u> |
| | Nonpriority Creditor's Name / Hudsankd Sizk 100 | When was the debt incurred? 1/20/6 | |
| | Number Street NN 55/25 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | Unliquidated Disputed | |
| | Debtor 1 only | Topace . | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | Student loans | |
| | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other Specify Benny | |
| | No September 1997 No Sep | | |
| | Tes / | | |
| 21 | Thomas Raleish | Last 4 digits of account number $\frac{7}{2}$ | |
| | Nonpriority Creditor's Name, Washington 15 429 | When was the debt incurred? $\frac{5}{2}$ | - |
| | Number Street (V) FL 60602 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | Student loans Obligations arising out of a separation agreement or divorce that | • |
| | | you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts Other. Specify William waw | |
| | Is the claim subject to offset? | Other. Specify LVIOT 4m Wat | |
| | Yes | | |
| 71 | | | |
| | | Last 4 digits of account number | |
| - | Nonpriority Creditor's Name | When was the debt incurred? | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | ☐ Contingent | |
| | Who incurred the debt? Check one. | Unliquidated Disputed | - |
| | Debtor 1 only | · | |
| | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | ĺ |
| | □ No | | |
| | ☐ Yes | | - |

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

| example, if a collection agency is trying to collect from yo 2, then list the collection agency here. Similarly, if you have | your bankruptcy, for a debt that you already listed in Parts 1 or 2. For u for a debt you owe to someone else, list the original creditor in Parts 1 or emore than one creditor for any of the debts that you listed in Parts 1 or 2, list the ns to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? |
|--|--|
| 121 N. Casath | Line 4 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | Part 2: Creditors with Nonpriority Unsecured Claims |
| Chicago 70 Colotte State ZIP Code | Last 4 digits of account number |
| Village W Bridgeview | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street Street | Line 5.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| Bridge New D 60455 | Claims |
| City State ZIP Code | Last 4 digits of account number |
| Police Septentment | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 7800 Archer Pd | Line $\frac{515}{2}$ of (Check one): \Box Part 1: Creditors with Priority Unsecured Claims |
| Number Street | Claims Part 2: Creditors with Nonpriority Unsecured |
| TOTAL FL 60458 State ZIP Code | Last 4 digits of account number |
| Chase Bank | On which entry in Part 1 or Part 2 did you list the original creditor? |
| OS Dearbarn St | Line 6 (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | Part 2: Creditors with Nonpriority Unsecured |
| Clarench 71, LOV. 12 | Claims |
| City State ZIP Code | Last 4 digits of account number |
| Name of Komer (car | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 135 S LaJalle St | Line 61 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | Part 2: Creditors with Nonpriority Unsecured Claims |
| Chicago 76 60608 | Last 4 digits of account number |
| Sawler Lawnday / Litha | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Names (C) A) (C) (C) D(43C) | |
| Number Street , MIL ALL AND STREET | Line 62 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| Clarento 71 1 0/254 | Claims |
| City State ZIP Code | Last 4 digits of account number |
| Name | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| | Part 2: Creditors with Nonpriority Unsecured Claims |
| City State ZIP Code | Last 4 digits of account number |
| | |

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Case number (if known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | Total claim |
|--------------|---|-----------------------------|
| Total claims | 6a. Domestic support obligations | 6a. s |
| from Part 1 | 6b. Taxes and certain other debts you or government | we the 596.00 |
| | 6c. Claims for death or personal injury w intoxicated | hile you were 6c. \$ |
| | 6d. Other. Add all other priority unsecured Write that amount here. | 6d. +s 7 430 |
| | 6e. Total. Add lines 6a through 6d. | 6e. 5 7026 |
| | v. | Total claim |
| Total claims | 6f. Student loans | 61. s 4212 |
| from Part 2 | 6g. Obligations arising out of a separatio or divorce that you did not report as p claims | n agreement oriority 6g. \$ |
| | 6h. Debts to pension or profit-sharing pla similar debts | ns, and other 6h. \$ |
| | Other. Add all other nonpriority unsecure Write that amount here. | 6i. + s |
| | 6j. Total. Add lines 6f through 6i. | 6j. s_11,725 |
| | contract to the second | |

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| Fill | in this in | formation to ide | ntify your case |); }} | | . age | | | | | |
|--------|----------------------------|---|---|---------------------|---|--------------------|----------------------------------|--|-------------|--|---|
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| | btor 2 | First Name | Middle Na | nne | Last Name | | | | | | |
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| | ited States t se number | запктирісу Сойті ю | i the svoithens c | DISTRICT OF THE TOP | , | | | | | ٢ | ☐ Check if this is an |
| | known) | | | | | | | | | , | amended filing |
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| info | rmation. If | te and accurate more space is ges, write your n | needed, copy t | he additional | page, fill it out, | together number | r, both are eq the entries, a | qually resp and attach | onsible fo | or supply page. On | the top of any |
| 1. | No. C | ave any executo heck this box and fill in all of the info | I file this form w | ith the court wi | th your other sch | hedules. \ | You have noth | ning else to | report on | this form. | 06A/B). |
| 2. | List separ | rately each pers rent, vehicle lea | | | ou have the co | ntract or | lease Then | state what | each con | tract or l | |
| | unexpired | leases. | | | | | , | | - 10 miles | 2 8 19 18 18 | |
| | Person o | r company with | whom you hav | re the contrac | t or lease | * . | State wha | t the contr | act or lea | se is for | |
| 2.1 | | | | | | | | | | | |
| | Name | | 4,11,11 | | | | | | | | • |
| | Number | Street | | | | | | | • | | |
| į | City | | State ZI | P Code | | | | <u></u> | | | |
| 2.2 | | | | | | | | | : 1 | | |
| : | Name | | | | | | | | | | |
| | Number | Street | | | | | | | • | | |
| | City | | State ZI | P Code | | | | | | | |
| 2.3 | Name - | | | | | ·· · | | | | . 1. | |
| | | | | | | <u>-</u> | | | | | |
| | Number | Street | | | | | | | | e i de la companya d La companya de la co | |
| 2.4 | City | | State ZI | P Code | | | | | | | |
| | Name | | | | | | | | 3 | , | |
| | Number | Street | | | | | | | | | |
| : | City | | State ZI | P Code | | | | | | | |
| 2.5 | <u> </u> | | State ZI | . 0006 | <u> </u> | | | | | | |
| :-,,,- | Name | | | | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | - | | | , | | |
| | Number | Street | *************************************** | | | | | | | | |
| | City | | State ZI | P Code | | | | | | e 1 24 2 | . 73 |

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Debtor 1

Case number (if known)

Additional Page if You Have More Contracts or Leases

| 2.2 | | Person or company with whom you have the contract or lease | | | | What the contract or lease is for | | | | |
|--------------|--------|--|--|----------|--|---------------------------------------|--|--|--|--|
| | Name | | Walter and the second s | | *************************************** | | | | | |
| | Number | Street | | | | | | | | |
| | City | | State | ZIP Code | | | | | | |
| 2 | Name | | | | | | | | | |
| | Number | Street | | | | | | | | |
| | City | | State | ZIP Code | NAME OF THE PROPERTY OF THE PR | | | | | |
| 2 | Name | | | | | | | | | |
| | Number | Street | | | | | | | | |
| | City | | State | ZIP Code | | · · · · · · · · · · · · · · · · · · · | | | | |
| 2 | | ······································ | | | | | | | | |
| | Name | | | | | | | | | |
| | Number | Street | State | ZIP Code | | | | | | |
| - | | | | 21 0000 | m~3:wi | | | | | |
| d | Name | | | | | | | | | |
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| | Name | | | | | | | | | |
| i | Number | Street | | | MMM. | | | | | |
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| | Name | | | | | | | | | |
| ĩ | Vumber | Street | | | | • | | | | |
| Ĉ | Sity | | State | ZIP Code | | | | | | |
| <u> </u> | lame | | | | | | | | | |
| | lumber | Street | ************************************** | | | | | | | |
| Č | ity | | State | ZIP Code | *************************************** | | | | | |

| Fill in this information to identify your case: | red 04/07/17 14:08:15 Desc Main 5 of 56 |
|---|---|
| Deblor 1 Antonic Ware | 3 01 30 |
| First Name Middle Name Last Name | |
| Debtor 2 (Spouse, if filling) First Name Middle Name Last Name | |
| United States Bankruptcy Court for the: Northern District of Illinois | |
| Case number | |
| (If known) | ☐ Check if this is a amended filing |
| O#=:-LE 400LL | ariended ming |
| Official Form 106H | |
| Schedule H: Your Codebtors | 12/15 |
| Codebtors are people or entities who are also liable for any debts you may have. Enter filing together, both are equally responsible for supplying correct information. and number the entries in the boxes on the left. Attach the Additional Page to this case number (if known). Answer every question. | If more space is needed, copy the Additional Page, fill it out, |
| Do you have any codebtors? (If you are filing a joint case, do not list either spouse | e as a codebtor.) |
| No D Yes | |
| 2. Within the last 8 years, have you lived in a community property state or territor | |
| Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, W. No. Go to line 3. | asnington, and vvisconsin.) |
| Yes. Did your spouse, former spouse, or legal equivalent live with you at the time | ne? |
| □ No | |
| Yes. In which community state or territory did you live? | . Fill in the name and current address of that person. |
| , , , , , | · |
| Name of your spouse, former spouse, or legal equivalent | |
| Number Street | |
| City State ZIP Code | _ |
| , | |
| In Column 1, list all of your codebtors. Do not include your spouse as a codebt shown in line 2 again as a codebtor only if that person is a guarantor or cosign Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule E/F, or Schedule G to fill out Column 2. | ner. Make sure you have listed the creditor on |
| | Column 2: The creditor to whom you owe the debt |
| Column 1: Your codebtor | Column 2: The creditor to whom you owe the debt Check all schedules that apply |
| .1 | Contradicts D. Bres |
| Name - | Schedule D, line |
| Number Street | Schedule C, line |
| | |
| City State ZIP Code | |
| Name | Schedule D, line |
| | ☐ Schedule E/F, line |
| Number Street | ☐ Schedule G, line |
| City State ZIP Code | |
| 3 | |
| Name | Schedule E/F, line |
| Number Street | Schedule G, line |
| Cib. | |
| City State Z/P Code | |

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Debtor 1

Case number (if known)

| 80550 | NAME OF TAXABLE PARTY. | or Heads | 443214 |
|--------------|------------------------|----------|--------|
| | | | |
| | | | |
| | | | |
| | | | |

Additional Page to List More Codebtors

| | Column | 1: Your codebtor | | | Column 2: The creditor to whom you owe the debt |
|---------|--------|--|--------|----------|---|
| 3 | | | | | Check all schedules that apply |
| <u></u> | Name | | | | Schedule D, line |
| - | | to the same of the | | | ☐ Schedule E/F, line |
| | Number | Street | | | Schedule G, line |
| | City | **** | State | ZIP Code | · · · · · · · · · · · · · · · · · · · |
| 3 | | | | | Schedule D, line |
| 1 | Name | | | | Schedule E/F, line |
| | Number | Street | | | Schedule G, line |
| : | ranibo | ouco: | | | |
| | City | | State | ZIP Code | |
| 3 | Name | | | | Schedule D, line |
| | Name | | | | ☐ Schedule E/F, line |
| | Number | Street | | | Schedule G, line |
| 1 | | | | | |
| | Cíty | | State | ZIP Code | · |
| 3 | | | | | |
| | Name | | | | Schedule D, line |
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| | City | | State | ZIP Code | · · · · |
| 3 | Ony | | State | Zir Code | |
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| | | | | | ☐ Schedule E/F, line |
| | Number | Street | | | Schedule G, line |
| | | | | | |
| . 7 | City | and the state of t | State | ZIP Code | |
| 3] | | | | | _ Schedule D, line |
| | Name | | | | ☐ Schedule E/F, line |
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| | Number | Street | | | Schedule G, line |
| | City | | State | ZIP Code | · - |
| | .=2 | | Clare | TIL COR | |
| | Name | | | | Schedule D, line |
| | | | | | ☐ Schedule E/F, line |
| į | Number | Street | | | □ Schedule G, line |
| i | City | | State | ZIP Code | |
| | | | Office | ZIF GOUR | |

| Fill in this information to identif | CONTRACTOR OF THE PROPERTY OF | ed 04/07/17 | f 5 | 07/17 14:08:1 6 | L5 Desc Main |
|---|---|---|---|---|--|
| Debtor 1 Anton | K | Warc | | | |
| First Name Debtor 2 | Middle Name | Last Name | *************************************** | | |
| (Spouse, if filing) First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the Case number | : Northern District of Illin | OIS | | Ot 1 Kills | |
| (If known) | | AANVAANIUM | | Check if this is: An amended t | filina |
| | | | | A supplement | showing postpetition chapter 13 the following date: |
| Official Form 106I | | | | MM / DD / YYYY | . |
| Schedule I: You | ur Income | | | | 12/15 |
| Be as complete and accurate as p supplying correct information. If y if you are separated and your spo separate sheet to this form. On the Part 1: Describe Employn | ou are married and not use is not filing with yo e top of any additional | t filing jointly, and ou, do not include i | your spouse is liv | ving with you, incli t your snouse If m | ude information about your spous |
| Fill in your employment information. | | Debtor 1 | | , Deb | tor 2 or non-filling spouse |
| If you have more than one job, attach a separate page with information about additional employers. | Employment status | Employed | | _ | Employed Not employed |
| Include part-time, seasonal, or self-employed work. Occupation may include student | Occupation | Securi | ty/fait | time ESP | |
| or homemaker, if it applies. | Employer's name | Joselyn | Knispec | tive Charte | er Hish School |
| | | 1970 5 | Arch | 0/ | I. A. K. Lee |
| | Employer's address | Number Street | Lin Car | Number | r Street |
| | | | | | s bs |
| | | Chicas | o Je C | 00616 | ì |
| | | City | State ZIP Cod | e City | State ZIP Code |
| | How long employed the | nere? | _ | *************************************** | . |
| Part 2: Give Details About | Montbly Income | | | | |
| Estimate monthly income as of spouse unless you are separated. | the date you file this fo | rm. If you have noth | ing to report for a | ny line, write \$0 in th | ne space. Include your non-filing |
| If you or your non-filing spouse har below. If you need more space, att | ve more than one emplo tach a separate sheet to | yer, combine the info this form. | ormation for all em | ployers for that pers | son on the lines |
| | | | For Del | \$ 75 VI | ptor 2 or 1 sing spouse ? |
| List monthly gross wages, sala deductions). If not paid monthly, or | ry, and commissions (I calculate what the month | before ali payroll ly wage would be. | 2. \$ 17 | -00 s_ | |
| 3. Estimate and list monthly overt | ime pay. | | 3. + <u>\$</u> | + \$ | |
| 4. Calculate gross income. Add line | e 2 + line 3. | | 4. s_12 | 20 5 | |
| | | | | The state of the state of the same of the company of the state of the | |

| Debtor 1 ANTINK War | | Ca | se number (if kn | own) | | |
|--|------------|------------|------------------|---------------|----------------------------|----------------|
| First Name Middle Name Last Name | - | For | Debtor 1 | For De | otor 2 or | |
| Copy line 4 here | 🗲 4. | \$ | 1220 | \$ | | , |
| 5. List all payroll deductions: | | | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$ | 220 | \$ | | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$ | 0 | \$ | | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$ | O | \$ | | |
| 5d. Required repayments of retirement fund loans | 5d. | \$ | | \$ | | |
| 5e. Insurance | 5e. | \$ | <u> </u> | \$ | | |
| 5f. Domestic support obligations | 5f. | \$ | <u> </u> | \$ | | |
| 5g. Union dues | 5g. | \$ | | \$ | | |
| 5h. Other deductions. Specify: | 5h. | +\$ | 0 | + \$ | | |
| 6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5$ | h. 6. | \$ | 320 | \$ | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 1000 | \$ | · · · · · | r |
| List all other income regularly received: | | | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0_ | \$ | 1 | |
| 8b. Interest and dividends | 8b. | \$ | | \$ | | |
| 8c. Family support payments that you, a non-filing spouse, or a depend regularly receive | dent | | 5. | | | |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | <u> </u> | \$ | | |
| 8d. Unemployment compensation | 8d. | \$ | <u> </u> | \$ | | |
| 8e. Social Security | 8e. | \$ | | \$ | | • |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | nce 8f. | \$ | 0 | \$ | | |
| 8g. Pension or retirement income | 8g. | \$ | 0 | \$ | | |
| 8h. Other monthly income. Specify: | 8h. | +\$ | 0 | +\$ | | |
| Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$ | 0 | \$ | | |
| Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | s [C | + 00 | \$ | | = \$ 000 |
| State all other regular contributions to the expenses that you list in Sche Include contributions from an unmarried partner, members of your household, friends or relatives. | | pendents | s, your roomn | nates, and c | ther | <u> </u> |
| Do not include any amounts already included in lines 2-10 or amounts that are Specify: | not ava | iilable to | pay expense | s listed in S | chedule J. 11. † | . s Q & 00 |
| Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S | | | | | 12. | \$ DOO |
| Qo you expect an increase or decrease within the year after you file this | ο | | | | | monthly income |

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| Fill in this information to identify yo | ur case: | | | |
|--|--|--|--|----------------------------------|
| Debtor 1 Antonu | ware | Check if | this is: | |
| First Name Debtor 2 | Middle Name Last Name | | nended filing | |
| (Spouse, if filing) First Name | Middle Name Last Name | | plement showing post | petition chapter 13 |
| United States Bankruptcy Court for the: No | rthern District of Illinois | exper | nses as of the following | date: |
| Case number (If known) | | MM / I | DD / YYYY | |
| Official Form 106J | | | | |
| Schedule J: You | r Expenses | | | 12/15 |
| Be as complete and accurate as poss information. If more space is needed, (if known). Answer every question. | ible. If two married people are fili | ng together, both are equally . On the top of any additional | responsible for supply I pages, write your nam | ing correct e and case number |
| Part 1: Describe Your House | hold | | `` | |
| 1. Is this a joint case? | | | | |
| No. Go to line 2. Yes. Does Debtor 2 live in a sep | arate household? | | | |
| ☐ No ☐ Yes. Debtor 2 must file C | official Form 106J-2, Expenses for S | eparate Household of Debtor 2 | | |
| _ | No Yes. Fill out this information for | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| Debtor 2. Do not state the dependents' | each dependent | | 7 (2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | □ No |
| names. | | | : | Yes D No |
| | | | | Yes |
| | | | | □ No |
| | | 4-14-74-74-74-74-74-74-74-74-74-74-74-74-74 | | Yes |
| | | | | . □ No |
| | | | 4 Sept. 18 | Yes |
| | | *************************************** | | ☐ No☐ Yes |
| a securioristic solucidas altinoidas de l'Esperantes associations et Afraça parte improvident de | | and a STAN AND AND COMPANY COMPANY AND | | |
| avances of agonia other than | No Yes | | | |
| Part 2: Estimate Your Ongoing | Monthly Expenses | | | |
| Estimate your expenses as of your ba expenses as of a date after the bankru applicable date. | nkruptcy filing date unless you a uptcy is filed. If this is a suppleme | re using this form as a supple ental Schedule J, check the be | ement in a Chapter 13 c ox at the top of the forn | ase to report and fill in the |
| Include expenses paid for with non-casuch assistance and have included it | | | Your expe | |
| 4. The rental or home ownership exp | | | | 00 |
| any rent for the ground or lot. | · | | 4. | |
| If not included in line 4: | | | | Ö |
| 4a. Real estate taxes | | | 4a. \$ | <u> </u> |
| 4b. Property, homeowner's, or rent | | | 4D. \$ | 5 |
| 4c. Home maintenance, repair, and | | | 4c. ⊅ | <u> </u> |
| 4d. Homeowner's association or co | ndominium dues | | 4d. \$ | |

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Debtor 1

| B | 1 tonce | Wart |
|------------|-------------|-----------|
| First Mame | Middle Name | Last Name |

Case number (if known)

| | | 9er - - | Your expenses |
|-----|---|---------------|---------------|
| | | | s 0 |
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5. | |
| 6. | Utilities: | | 200 |
| | 6a. Electricity, heat, natural gas | 6а. | \$ 000 |
| | 6b. Water, sewer, garbage collection | 6b. | * <u> </u> |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6¢. | \$ |
| | 6d. Other. Specify: | 6d. | \$ <u>0</u> |
| 7. | Food and housekeeping supplies | 7. | \$ 0.00 |
| 8. | Childcare and children's education costs | 8. | \$ |
| 9. | Clothing, laundry, and dry cleaning | 9. | \$ 40 |
| 10. | Personal care products and services | 10. | \$ |
| 11. | Medical and dental expenses | 11. | \$ |
| 12. | Transportation. Include gas, maintenance, bus or train fare. | | \$ |
| | Do not include car payments. | 12. | 0. |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ |
| 14. | Charitable contributions and religious donations | 14. | \$ |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a. | \$ |
| | 15b. Health insurance | 15b. | \$ |
| | 15c. Vehicle insurance | 15c. | s 60 |
| | 15d. Other insurance. Specify: | 15d. | \$ <u>U</u> |
| 16. | Taxes. Do not include taxes deducted from your pay or included in tines 4 or 20. Specify: | 16 . | \$ |
| 17. | Installment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 | 17a. | \$ |
| | 17b. Car payments for Vehicle 2 | 17b. | \$ |
| | 17c. Other. Specify: | 17c. | \$ |
| | 17d. Other. Specify: | 17d. | \$ |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ |
| 19. | | 19. | |
| | Specify: | | |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom | ie. | 1 6 |
| | 20a. Mortgages on other property | 20a. | 5 |
| | 20b. Real estate taxes | 20b. | 5 |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$ |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ |
| | 20e. Homeowner's association or condominium dues | 20e. | \$ |

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|---|----------------------|--------------------------------|
| First Name Middle Name Last Name 21. Other. Specify: | 21. | +\$ |
| Calculate your monthly expenses. 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. | 22a. 22b. 22c. | \$ 1250 \$ 1250 |
| 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23a. 23b. 23c. | \$ 1000 -\$ 1250 \$ -250 |
| 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? | | |
| Yes. Explain here: | | |
| | | |

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| Fill in this information to identify your case: | | | |
|---|------------------------------|---|--------------------|
| Had and | laha et | | |
| Debtor 1 First Name Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) First Name Middle Name | Last Name | | |
| United States Bankruptcy Court for the: Northern District of I | Ilinois | | |
| Case number((f known) | Addition or the developed | | |
| (II Allowis) | | | Check if this is a |
| | | | amended filing |
| Official Forms 100D | | | |
| Official Form 106Dec | | | |
| Declaration About an | Individual D | ebtor's Schedules | 12/15 |
| If two married people are filing together, both are e | qually responsible for supp | lying correct information. | |
| You must file this form whenever you file bankrupt | | | |
| obtaining money or property by fraud in connection years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 35 | 71. | mresant in mee up to \$200,000, or imprisonned | 11t 101 ap to 20 |
| | | | |
| Cinc Pale | | | |
| Programme Sign Relow | | | |
| Sign Below | | | |
| | T an attorney to help you f | ill out bankruntey forme? | |
| Did you pay or agree to pay someone who is NO | OT an attorney to help you f | ill out bankruptcy forms? | : |
| | | | and |
| Did you pay or agree to pay someone who is NO | | ill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119). | and |
| Did you pay or agree to pay someone who is NO | | Attach Bankruptcy Petition Preparer's Notice, Declaration, | and |
| Did you pay or agree to pay someone who is NO | | Attach Bankruptcy Petition Preparer's Notice, Declaration, | and |
| Did you pay or agree to pay someone who is NO | | Attach Bankruptcy Petition Preparer's Notice, Declaration, | and |
| Did you pay or agree to pay someone who is NO No Yes. Name of person | | Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119). | and |
| Did you pay or agree to pay someone who is NO No Yes. Name of person | | Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119). | and |
| Did you pay or agree to pay someone who is NO No Yes. Name of person | | Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119). Signature (Official Form 119). | |
| Did you pay or agree to pay someone who is NO No Yes. Name of person | | Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119). Iles filed with this declaration and | |
| Did you pay or agree to pay someone who is NO No Yes. Name of person | ad the summary and schedu | Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119). Iles filed with this declaration and | |
| Did you pay or agree to pay someone who is NO | ad the summary and schedu | Attach Bankruptcy Petition Preparer's Notice, Declaration, Signature (Official Form 119). Iles filed with this declaration and | |

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| | Antenz | 1 | wave | | | |
|------------------------|--|---|---|---|-----------------------------|---|
| Debtor 2 | First Name | Middle Name | Last Name | | | |
| | ng) First Name | Middle Name | Last Name | - | | |
| Inited State | s Bankruptcy Court for t | he: Northern District o | f Illinois | | • . | |
| ase numbe | er | | | | | ☐ Check if this is |
| | n de 1900 de seu | <u></u> | | | | amended filing. |
| ,,,,, | _ 407 | | | | | |
| | Form 107 | ancial Affai | ire for Indiv | viduals Filina | for Bankruptc | V 04 |
| | | | | | ally responsible for supply | |
| ormation. | . If more space is n | eeded, attach a sepa | rate sheet to this for | m. On the top of any add | litional pages, write your | name and case |
| nber (if K | nown). Answer eve | ry question. | | | • | * , |
| art 1: | Give Details Abo | ut Your Marital Sta | atus and Where Y | ou Lived Before | | |
| De Contraction | | | | | | |
| What is | your current marita | il status? | | | | |
| Mari | | | | J | | |
| The second second | | | | | | |
| □X NOt | married | | | | | |
| | | e vou lived anywhers | other than where y | ou live now? | | |
| During t | | e you lived anywhere | other than where y | ou live now? | | |
| During t | the last 3 years, hav | | | | | |
| During (Yes. | the last 3 years, hav | e you lived anywhere | years. Do not include | where you live now. | | |
| During (Yes. | the last 3 years, hav | | | | | a Dates Debtor 2 |
| During (Yes. | the last 3 years, hav | | years. Do not include Dates Debtor 1 | where you live now. Debtor 2: | | Dates Debtor 2 |
| During (Yes. | the last 3 years, hav | | years. Do not include Dates Debtor 1 | where you live now. | | Dates Debtor 2 (Ilved there Same as Debto |
| During to No De | the last 3 years, hav | | years. Do not include Dates Debtor 1 | where you live now. Debtor 2: | | a Dates Debtor 2 Ilved there Same as Debto |
| During (No Yes. | the last 3 years, hav List all of the places | | years. Do not include Dates Debtor 1 lived there | Debtor 2: Same as Debtor 1 | | Dates Debtor 2 Ilived there Same as Debto From To |
| During (No Yes. | the last 3 years, hav List all of the places | | years. Do not include Dates Debtor 1 lived there From | Debtor 2: Same as Debtor 1 | | From |
| During to No De | the last 3 years, hav List all of the places btor 1: | | years. Do not include Dates Debtor 1 lived there From | Debtor 2: Same as Debtor 1 | State ZIP Code | From |
| During to No De | the last 3 years, hav List all of the places btor 1: | you lived in the last 3 | years. Do not include Dates Debtor 1 lived there From | Debtor 2: Same as Debtor 1 Number Street City | State ZIP Code | From |
| During to No De | the last 3 years, hav List all of the places btor 1: | you lived in the last 3 | years. Do not include Dates Debtor 1 lived there From To | Debtor 2: Same as Debtor 1 Number Street | State ZIP Code | To Same as Debtor |
| During to No De | the last 3 years, hav List all of the places btor 1: | you lived in the last 3 | years. Do not include Dates Debtor 1 lived there From To From | Debtor 2: Same as Debtor 1 Number Street City | State ZIP Code | From Same as Debto |
| During to No De | the last 3 years, hav List all of the places btor 1: umber Street | you lived in the last 3 | years. Do not include Dates Debtor 1 lived there From To | Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1 | State ZIP Code | To Same as Debtor |
| During to No De | the last 3 years, hav List all of the places btor 1: umber Street | you lived in the last 3 | years. Do not include Dates Debtor 1 lived there From To From | Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1 | State ZIP Code | From Same as Debtor |
| During to No De | the last 3 years, have list all of the places elector 1: | you lived in the last 3 | years. Do not include Dates Debtor 1 lived there From To From | Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1 | State ZIP Code | From Same as Debtor |
| During to No De | the last 3 years, have below the places below 1: umber Street | you lived in the last 3 State ZIP Code | years. Do not include Dates Debtor 1 lived there From To From To To | Debtor 2: Same as Debtor 1 Number Street City Number Street City City City | State ZIP Code | From To Same as Debto From To |
| During to No De No Cit | the last 3 years, have below the places below 1: umber Street ty the last 8 years, did years, di | you lived in the last 3 State ZIP Code State ZIP Code | years. Do not include Dates Debtor 1 lived there From To From To pouse or legal equiv | Debtor 2: Same as Debtor 1 Number Street City Number Street City City City City City City City | State ZIP Code | From To Same as Debto From To Community property |
| During to No De No Cit | the last 3 years, have below the places below 1: umber Street ty the last 8 years, did years, di | you lived in the last 3 State ZIP Code State ZIP Code | years. Do not include Dates Debtor 1 lived there From To From To pouse or legal equiv | Debtor 2: Same as Debtor 1 Number Street City Number Street City City City City City City City | State ZIP Code | From To Same as Debto From To Community property |

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| Debtor | | Document Name | Page 44 of 56 | | esc man |
|----------------|---|--|---|--|---|
| F If | rid you have any income from employmer ill in the total amount of income you received you are filing a joint case and you have income. No Yes. Fill in the details. | d from all jobs and all bus | inesses, including part-ti | me activities. | ndar years? |
| | | Debtorsi | | Denor2 | |
| | | Sources of Income Check all that apply. | Gross income (before deductions and exclusions) | Sources of Income? Check all that apply? | Gross Income: (before deductions and exclusions) |
| | From January 1 of current year until the date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | \$ | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ |
| | For last calendar year: (January 1 to December 31,) | ☐ Wages, commissions, bonuses, tips ☐ Operating a business | \$ | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ |
| | For the calendar year before that: (January 1 to December 31,) | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ | ☐ Wages, commissions, bonuses, tips ☐ Operating a business | \$ |
| In ur ga | id you receive any other income during the clude income regardless of whether that incoment, and other public benefit paymembling and lottery winnings. If you are filing | ome is taxable. Examples lents; pensions; rental inco la joint case and you have | of other income are alinome; interest; dividends; e income that you receive | money collected from laws ed together, list it only once | Security, uits; royalties; and |
| | st each source and the gross income from e | each source separately. Do | o not include income that | t you listed in line 4. | |
| | No Yes. Fill in the details. | | | | |
| | · · · · · · · · · · · · · · · · · · · | Denior1 | | ⊝abio):Z | |
| | - | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of Income Describe below. | Gross Income from each source (before deductions and exclusions) |
| - | From January 1 of current year until the date you filed for bankruptcy: | | \$ \$ \$ | | \$ \$ |
| | | | | 3 | |
| | For last calendar year: | | \$ | | \$ |

(January 1 to December 31,

For the calendar year before that: (January 1 to December 31, ____) Case 17-11087 Doc 1 Filed 04/07/17 Entered 04/07/17 14:08:15 Desc Main Document Page 45 of 56

| ٦a | htor | 1 | |
|----|------|---|--|

| _ A | Ann | Ware | Case number (if known) |
|------------|-------------|-----------|------------------------|
| First Name | Middle Name | Last Name | |

| Part 3: | List Certain Payments You Made Be | fore You File | d for Bankruptcy | | | |
|-------------|--|--|--|----------------------|---------------------------------------|--------------------------------|
| 5. Are eith | ner Debtor 1's or Debtor 2's debts primarily | y consumer de | bts? | | | |
| ☐ No. | Neither Debtor 1 nor Debtor 2 has primar "incurred by an individual primarily for a pers | rily consumer o | lebts. Consumer debts household purpose." | are defined in 11 U. | S.C. § 101 | (8) as |
| | During the 90 days before you filed for bank | | | of \$6,425* or more? | | |
| | ☐ No. Go to line 7. | | | | i . | |
| | Yes. List below each creditor to whom you total amount you paid that creditor. | Do not include | payments for domestic s | support obligations. | such as | |
| | child support and alimony. Also, do * Subject to adjustment on 4/01/19 and ever | | | | | |
| Yes. | . Debtor 1 or Debtor 2 or both have primari | ily consumar d | abte | | | |
| G | During the 90 days before you filed for bankr | | | of \$600 or more? | : . | |
| | No. Go to line 7. | ,, , | ,, | | ; | |
| | | | | | | |
| | Yes. List below each creditor to whom you creditor. Do not include payments for alimony. Also, do not include payments. | or domestic sup | port obligations, such as | s child support and | id that | |
| | | Dates of payment | Total amount paid | Amount you st | The state of the second second | Was this payment for. |
| | Creditor's Name | | \$ | \$ | | ☐ Mortgage |
| | Greator's Name | | | | | ☐ Car |
| | Number Street | *************************************** | | | . 1 | Credit card |
| | | | | | | Loan repayment |
| | | | | | | Suppliers or vendors |
| | City State ZIP Code | | | | | Other |
| | | · · · · · · · · · · · · · · · · · · · | | | | |
| | | | \$ | \$ | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | D |
| | Creditor's Name | | Y | <u> </u> | | ☐ Mortgage ☐ Car |
| | | | | | • | |
| | Number Street | | | | | ☐ Credit card ☐ Loan repayment |
| | | | | | | Suppliers or vendors |
| | | | | | | Other |
| | City State ZIP Code | | | | ş. | Cure Other |
| | The second secon | - Company of the contract of t | and the control of th | | | |
| | | | \$ | \$ | | ☐ Mortgage |
| | Creditor's Name | | | | | ☐ Car |
| | | *************************************** | | | | Credit card |
| | Number Street | | | | | |
| | | THE STATE OF THE S | | | | Loan repayment |
| | | | | | | Suppliers or vendors |
| | City State ZIP Code | | | | | Other |

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| or 1 (d) | ntonic | | Ware | | Cook or the co | |
|--|---------------------------------------|--|---|--|---|--|
| First Name | Middle Name | Las | t Name | | Case number (if know | 71) |
| nsiders include orporations of v gent, including | your relatives; a which you are ar | iny general p n officer, dire ess you opera ny. | eartners; relatives of a ctor, person in control | ny general partners; I, or owner of 20% o or. 11 U.S.C. § 101. | ; partnerships of whi | who was an insider? ich you are a general partner; g securities; and any managing or domestic support obligations, |
| | payments to an | | | | | A A A A A A A A A A A A A A A A A A A |
| , | | | Dates of payment | | Amount you still owe | Reason for this payment |
| Insider's Name | 3 | | | . \$ | \$ | |
| Number Stre | eet | | | - | | |
| City | - | State ZIP (| Code | - | | |
| ··· , | | The state of the s | | \$ | \$ | |
| Insider's Name Number Stree | et | | | - | | |
| | م. | | | | | |
| City | | State ZIP C | odo | • | | 2000 3000 de |
| insider? dude payments No | | nteed or cosi | gned by an insider. | payments or trans Total amount paid | fer any property or Amount you still owe | n account of a debt that benefited Reason for this payment. |
| | | | · | \$ | s | |
| Insider's Name | | | **** | | | |
| Number Street | | | | | | |
| | | | | | | |
| City | | State ZIP Coo | de | e del mare e didinare mare per e como e que a como que a como que e como que el como que el como que el como q | | |
| Insider's Name | | | | \$ | \$ | |
| Number Street | | | | | | |
| City | Si | tate ZIP Cod | 0 | | | |

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| List all su | year before you filed for bankruptcy, wer ch matters, including personal injury cases, act disputes. | | | | |
|--------------------------------|--|---|--|--|---|
| ☐ No ☑ Yes. F | Fill in the details. | | | * * * | |
| AM _{APPARATE SEPTEMB} | title Covil law Mazistral | e of the case | Court or agency Chu(a(v)) vic Court Name 50 V Wash Number Street Ch ((4) v J City State | bet-paley (insten Rn L 60602 | Status of the case Pending On appeal Concluded |
| o. Within 1 ye | ear before you filed for bankruptcy, was | any of your property re | Pecerduca Court Name Number Street Chicago D City State | ZIP Code Clark Clark Leven ZIP Code nished, attached, s | Pending On appeal Concluded |
| No. G | hat apply and fill in the details below. o to line 11. Il in the information below. | | n u ne | | rengami byokasi |
| | | Describe the property | | Date | Value of the property |
| Cr | editor's Name | • | | | \$ <u>·</u> |
| Nu | imber Street | Explain what happened | | | , |
| Cit | y State ZIP Code | Property was reported Property was garred Property was garred Property was atta | closed. | | · |
| also Procedence MA | | Describe the property | 1.3 | Date | Value of the property |
| Cre | editor's Name | | | | \$ |
| Nur | mber Street | Explain what happened | ************************************** | | |
| - | | Property was repo | caaaad | | |

City

Property was foreclosed. Property was garnished.

☐ Property was attached, seized, or levied.

ZiP Code

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| | First Name Middle Name | Last Name | Case number (if known) |
|---|---|---|--|
| | CANCENSING MINUTE MAINE | work Matte | |
| | 0 days before you filed for bar s or refuse to make a paymen | | ling a bank or financial institution, set off any amounts from y |
| Yes. | Fill in the details. | | |
| | | Describe the action the credi | itor took Date action Amount was taken was taken to the control of |
| Credito | or's Name | | j - 40 s |
| Numbe | er Street | | <u> </u> |
| | | | |
| City | State ZIP Coo | Last 4 digits of account num | nber: XXXX |
| | | | |
| | | ruptcy, was any of your property a custodian, or another official? | in the possession of an assignee for the benefit of |
| No | , | | • |
| Yes | | | |
| 5H L | ist Certain Gifts and Conti | ributions | |
| | | | |
| hin 2 | vears before you filed for bank | runtcy, did you give any gifts wi | th a total value of more than \$600 per person? |
| No | • | ruptcy, did you give any gifts wi | th a total value of more than \$600 per person? |
| No Yes. i | Fill in the details for each gift. with a total value of more than \$6 | | Dates you gave |
| No Yes. i | Fill in the details for each gift. | | 1一样子或红素素或素素等。 多种物质运动设置中心 |
| No Yes. i | Fill in the details for each gift. with a total value of more than \$6 | | Dates you gave |
| No Yes. I Gifts per p | Fill in the details for each gift. with a total value of more than \$6 | | Dates you gave |
| No Yes. i Gifts per p | Fill in the details for each gift. with a total value of more than \$60 person | | Dates you gave |
| No Yes. I Gifts per p | Fill in the details for each gift. with a total value of more than \$6i serson to Whom You Gave the Gift | Describe the gifts | Dates you gave |
| No Yes. I Gifts per p | Fill in the details for each gift. with a total value of more than \$60 person | Describe the gifts | Dates you gave |
| No Yes. I Gifts per p | Fill in the details for each gift. with a total value of more than \$6i serson to Whom You Gave the Gift | Describe the gifts | Dates you gave |
| No Yes. I Gifts per p | with a total value of more than \$60 person to Whom You Gave the Gift | Describe the gifts | Dates you gave |
| No Yes. I Gifts per p | with a total value of more than \$60 person to Whom You Gave the Gift Street | Describe the gifts | Dates you gave Value the gifts \$\$ |
| No Yes. I Gifts per p Person Number City Person Gifts w | with a total value of more than \$600 in the details for each gift. with a total value of more than \$600 in the details for each gift. Street State ZIP Code 's relationship to you | Describe the gifts | Dates you gave Value the gifts \$\$ |
| No Yes. I Gifts per p Person Number City Person Gifts w | with a total value of more than \$600 in the details for each gift. with a total value of more than \$600 in the details for each gift. Street State ZIP Code 's relationship to you | Describe the gifts | Dates you gave Value the gifts \$ Dates you gave Value |
| No Yes. I Gifts per p Person City Person Gifts w per per | with a total value of more than \$600 in the details for each gift. with a total value of more than \$600 in the details for each gift. Street State ZIP Code 's relationship to you | Describe the gifts | Dates you gave Value the gifts \$ Dates you gave Value |
| No Yes. I Gifts per p Person City Person Gifts w per per | with a total value of more than \$600 rson | Describe the gifts | Dates you gave Value the gifts \$ Dates you gave Value |
| No Yes. I Gifts per p Person City Person Gifts w per per | with a total value of more than \$600 rson | Describe the gifts | Dates you gave Value the gifts \$ Dates you gave Value |
| No Yes. I Gifts per p Person City Person Gifts w per per | with a total value of more than \$600 son | Describe the gifts | Dates you gave Value the gifts \$ Dates you gave Value |
| No Yes. I Gifts per p Person City Person Gifts w per per | with a total value of more than \$600 son | Describe the gifts | Dates you gave Value the gifts \$ Dates you gave Value |

Case number (if known) Debtor 1 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Describe what you contributed Gifts or contributions to charities that total more than \$600 Charity's Name Street Number ZIP Code City State List Certain Losses Part 6: 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No 📆 Yes. Fill in the details. Describe any insurance coverage for the loss Describe the property you lost and how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No No Yes. Fill in the details. · 车辆1888 150 - 170 Amount of payment Description and value of any property transferred Date payment or transfer was made Person Who Was Paid Number Street City ZIP Code Email or website address Person Who Made the Payment, if Not You

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Page 50 of 56 Debtor 1 Description and value of any property transferred Date payment or Amount of transfer was made payment Person Who Was Paid Number Street ZIP Code Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Yes. Fill in the details. Amount of payment Date payment or Description and value of any property transferred Person Who Was Paid Number Street State City 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No. Yes. Fill in the details. Describe any property or payments received Date transfer Description and value of property or debts paid in exchange was made transferred Person Who Received Transfer Number Street ZIP Code City Person's relationship to you Person Who Received Transfer Number Street Person's relationship to you _

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Case 17-11087 Filed 04/07/17 Entered 04/07/17 14:08:15 Desc Main Page 51 of 56 Document Debtor 1 Case number (if known) 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Description and value of the property transferred Date transfer Name of trust Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. D No Yes. Fill in the details. Last balance before Last 4 digits of account number Type of account or closing or transfer Instrument closed, sold, moved, or transferred at the work in the Name of Financial Institution Checking ☐ Savings Number Street ☐ Money market ☐ Brokerage City State ZIP Code Other_ Checking XXXX-Name of Financial Institution ☐ Savings ☐ Money market Number Street ☐ Brokerage Other State ZIP Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? ™ No Yes. Fill in the details. Who else had access to it? Do you still

City

Name of Financial Institution

State

792 Code

Number Street

ZIP Code

Name

City

Number Street

have it?

No
Yes

Page 52 of 56 **Document** Debtor 1 Case number (it known 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else has or had access to it? Do you still have it? □ No Name of Storage Facility Number Street Number Street CityState ZIP Code ZIP Code Part 9: **Identify Property You Hold or Control for Someone Else** 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **S** No Yes. Fill in the details. Where is the property? Describe the property Owner's Name Number Street Number Street ZIP Code City ZIP Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No 🔁 Yes. Fill in the details. Governmental unit Environmental law, if you know it Name of site Governmental unit Number Street Number Street City State ZIP Code City State ZIP Code

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Case number (if known)_

| → Yes. Fill in the det | | Governmental unit | Environmental law, if you know it |
|--|--|--|---|
| | | OFFERMICIAL UNIX | Environmental law, if you know it) |
| Name of site | | Governmental unit | |
| Number Street | | Number Street | |
| | | _ | _ |
| | | City State ZIP Code | |
| City | State ZIP Code | | |
| | in any judicial or a | dministrative proceeding under an | y environmental law? Include settlements and orders. |
| NoYes. Fill in the detail | ails | | |
| | | Court or agency | Nature of the case Status of the case |
| Case title | | _ | |
| | | Court Name | — □ Pendin □ On app |
| | | – Nymber Street | — Conclu |
| | | | |
| Case number | | | |
| ithin 4 years before y | you filed for bankru or or self-employed | in a trade, profession, or other act | Business ave any of the following connections to any business? tivity, either full-time or part-time |
| ithin 4 years before y A sole proprieto A member of a l A partner in a p An officer, direct | you filed for bankrup or or self-employed limited liability com artnership ctor, or managing ex | ptcy, did you own a business or ha in a trade, profession, or other act pany (LLC) or limited liability partr secutive of a corporation ag or equity securities of a corpora | Business ave any of the following connections to any business? tivity, either full-time or part-time nership (LLP) |
| ithin 4 years before y A sole proprieto A member of a l A partner in a p An officer, direct An owner of at l No. None of the abo | you filed for bankrup or or self-employed limited liability com artnership ctor, or managing ex least 5% of the votir ove applies. Go to P | ptcy, did you own a business or had in a trade, profession, or other act pany (LLC) or limited liability partracecutive of a corporationing or equity securities of a corporatart 12. In the details below for each business. | Business ave any of the following connections to any business? tivity, either full-time or part-time mership (LLP) ation ness. |
| ithin 4 years before y A sole proprieto A member of a l A partner in a p An officer, direct An owner of at l No. None of the abo | you filed for bankrup or or self-employed limited liability com artnership ctor, or managing ex least 5% of the votir ove applies. Go to P | ptcy, did you own a business or had in a trade, profession, or other act pany (LLC) or limited liability partracecutive of a corporation ag or equity securities of a corporation art 12. | Business ave any of the following connections to any business? tivity, either full-time or part-time nership (LLP) ation ness. Employer identification number |
| ithin 4 years before y A sole proprieto A member of a l A partner in a p An officer, direct An owner of at l No. None of the about | you filed for bankrup or or self-employed limited liability com artnership ctor, or managing ex least 5% of the votir ove applies. Go to P | ptcy, did you own a business or had in a trade, profession, or other act pany (LLC) or limited liability partracecutive of a corporationing or equity securities of a corporatart 12. In the details below for each business. | Business ave any of the following connections to any business? tivity, either full-time or part-time nership (LLP) ation mess. Employer identification number Do not include Social Security number or ITIN. |
| ithin 4 years before y A sole proprieto A member of a l A partner in a p An officer, direct An owner of at l No. None of the about | you filed for bankrup or or self-employed limited liability com artnership ctor, or managing ex least 5% of the votir ove applies. Go to P | ptcy, did you own a business or hat in a trade, profession, or other act pany (LLC) or limited liability partracecutive of a corporation ag or equity securities of a corporation in the details below for each business | Business ave any of the following connections to any business? tivity, either full-time or part-time mership (LLP) ation mess. Employer identification number Do not include Social Security number or ITIN. |
| ithin 4 years before y A sole proprieto A member of a l A partner in a p An officer, direct An owner of at l No. None of the above yes. Check all that | you filed for bankrup or or self-employed limited liability com artnership ctor, or managing ex least 5% of the votir ove applies. Go to P | ptcy, did you own a business or had in a trade, profession, or other act pany (LLC) or limited liability partracecutive of a corporationing or equity securities of a corporatart 12. In the details below for each business. | Business ave any of the following connections to any business? tivity, either full-time or part-time mership (LLP) ation mess. Employer identification number Do not include Social Security number or ITIN. EIN: Dates business existed |
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| ithin 4 years before y A sole proprieto A member of a l A partner in a p An officer, direct An owner of at l No. None of the above. Check all that | you filed for bankrup or or self-employed limited liability com artnership ctor, or managing ex least 5% of the votir ove applies. Go to P apply above and fill | ptcy, did you own a business or hat in a trade, profession, or other act pany (LLC) or limited liability partracecutive of a corporation ag or equity securities of a corporation in the details below for each business | Business ave any of the following connections to any business? tivity, either full-time or part-time mership (LLP) ation mess. Employer Identification number Do not include Social Security number or ITIN. EIN: Dates business existed From Employer Identification number. |
| A sole proprieto A member of a A partner in a p An officer, direct An owner of at No. None of the above. Check all that Business Name | you filed for bankrup or or self-employed limited liability com artnership ctor, or managing ex least 5% of the votir ove applies. Go to P apply above and fill | ptcy, did you own a business or hat in a trade, profession, or other act pany (LLC) or limited liability partresecutive of a corporation and or equity securities of a corporator art 12. In the details below for each business Describe the nature of the business | Business ave any of the following connections to any business? tivity, either full-time or part-time mership (LLP) ation mess. Employer Identification number Do not include Social Security number or ITIN. EIN: Dates business existed From Employer Identification number. |
| ithin 4 years before y A sole proprieto A member of a A partner in a p An officer, direct An owner of at I No. None of the above Yes. Check all that Business Name Number Street | you filed for bankrup or or self-employed limited liability com artnership ctor, or managing ex least 5% of the votir ove applies. Go to P apply above and fill | ptcy, did you own a business or hat in a trade, profession, or other act pany (LLC) or limited liability partresecutive of a corporation and or equity securities of a corporator art 12. In the details below for each business Describe the nature of the business | Business ave any of the following connections to any business? tivity, either full-time or part-time nership (LLP) ation mess. Employer identification number Do not include Social Security number or ITIN. EIN: Dates business existed From To Employer identification number Do not include Social Security number or ITIN. EIN: Employer identification number Do not include Social Security number or ITIN. EIN: EIN: ——————————————————————————————————— |
| A sole proprieto A member of a A partner in a p An officer, direct An owner of at No. None of the above. Check all that Business Name City Business Name | you filed for bankrup or or self-employed limited liability com artnership ctor, or managing ex least 5% of the votir ove applies. Go to P apply above and fill | ptcy, did you own a business or hat in a trade, profession, or other act pany (LLC) or limited liability partresecutive of a corporation and or equity securities of a corporator art 12. In the details below for each business Describe the nature of the business | Business ave any of the following connections to any business? tivity, either full-time or part-time nership (LLP) ation mess. Employer Identification number Do not include Social Security number or ITIN. EIN: Dates business existed From To Employer Identification number Do not Include Social Security number or ITIN. EIN: Do not Include Social Security number or ITIN. EIN: Do not Include Social Security number or ITIN. |
| A sole proprieto A member of a A partner in a p An officer, direct An owner of at No. None of the above. Check all that Business Name City Business Name | you filed for bankrup or or self-employed limited liability com artnership ctor, or managing ex least 5% of the votir ove applies. Go to P apply above and fill | ptcy, did you own a business or hat in a trade, profession, or other act pany (LLC) or limited liability partresecutive of a corporation and or equity securities of a corporator art 12. In the details below for each business Describe the nature of the business Name of accountant or bookkeeper | Business ave any of the following connections to any business? tivity, either full-time or part-time mership (LLP) ation mess. Employer identification number Do not include Social Security number or ITIN. EIN: Dates business existed From To Employer identification number Do not include Social Security number or ITIN. EIN: Dates business existed EIN: Dates business existed |

Filed 04/07/17 Entered 04/07/17 14:08:15 Desc Main Document Page 54 of 56 Debtor 1 Employer Identification number Describe the nature of the business Do not include Social Security number or ITIN. Business Name Number Street Name of accountant or bookkeeper ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No No Yes. Fill in the details below. Date Issued Name MM / DD / YYYY Number City ZIP Code State **Part 12:** Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No. Yes

🗓 No

Yes. Name of person___

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| | Fill in this inform | nation to identify yo | our case: | | | |
|---|-----------------------------|--------------------------|-----------------------------|-------------|---|--|
| Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number | | Antwu. | | Warc | | |
| United States Bankruptcy Court for the: Northern District of Illinois Case number Che | | | | LBSCRAINE | | |
| Case number Che | (Spouse, if filing) First N | Name | Middle Name | Last Name | | |
| | United States Bankri | ruptcy Court for the: No | orthern District of Illinoi | s | : | |
| | | | | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

rt 1: List Your Creditors Who Have Secured Claims

| For any creditors the information below. | at you listed in Part 1 of Schedule D: Cred | ditors Who Have Claims Secured by Prope | erty (Official Form 106D), fill in the |
|--|---|---|--|
| Identify the creditor | and the property that is collateral | What do you intend to do with the prop | erry that Did you claim the property |
| Creditor's name: | 1 1 1 A | ☐ Surrender the property. | □ No |
| Description of property securing debt: | NADocsnot | Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. | Yes |
| | off) | Retain the property and [explain]: | ************************************** |
| Creditor's name: | | ☐ Surrender the property. | □ No |
| Description of | | Retain the property and redeem it. | : ,,□ Yes |
| property securing debt: | | Retain the property and enter into a Reaffirmation Agreement. | |
| | | Retain the property and [explain]: | |
| Creditor's name: | | ☐ Surrender the property. | □ No |
| Description of | | Retain the property and redeem it. | Yes |
| property securing debt: | | Retain the property and enter into a Reaffirmation Agreement. | The deficate |
| | | ☐ Retain the property and [explain]: | |
| Creditor's | | ☐ Surrender the property. | □ No |
| Description of | | Retain the property and redeem it. | ☐ Yes |
| property securing debt: | | Retain the property and enter into a Reaffirmation Agreement. | The state of the s |
| | | Retain the property and [explain]: | - |
| | *** **** **** ****** ****************** | | |

Debtor 1

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Part 2:

List Your Unexpired Personal Property Leases

| or any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G |
|--|
| ill in the information below. Do not list roal actate looses, the united to be executory Contracts and Onexpired Leases (Official Form 106G |
| ill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet |
| ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). |

| Describe your unexpired personal property leases | 3 | Will the lease be assumed? |
|---|--|-----------------------------|
| Lessor's name: | | No. |
| Description of leased property: | | Yes |
| Lessor's name: | • | □ No |
| Description of leased property: | A Doce not again | ☐ Yes |
| Lessor's name: | | □ No . |
| Description of leased property: | | ☐ Yes |
| Lessor's name: | | □ No. |
| Description of leased property: | | Yes |
| Lessor's name: | | □ No |
| Description of leased property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased property: | | ☐ Yes |
| Lessor's name: | | O No |
| Description of leased property: | | Yes |
| | | |
| Sign Below | | |
| nder penalty of perjury, I declare that I have indicat rsonal property that is subject to an unexpired lea | ted my intention about any property of my estate | that secures a debt and any |
| 1 4 | X | |
| gnature of Debtor 1 4/7/2017 | Signature of Debtor 2 | - |
| MM/ DD / YYYY | Date MM / DD / YYYY | |